Area Analysis

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Introduction

The Area Analysis is developed to provide The Innova Group and Work Group an overview of the Area, as well as to communicate the team's findings and highlight specific issues based on questionnaire documentation, population distribution review and workload analysis. Overall it takes each of us out of our local environment and places us in a position to see beyond our Service Area and Service Unit needs. The Area Analysis is organized into the following five areas.

- Population Profile Summary
- Survey Summary
- Underserved Populations and Recommended Service Area
- Recommended Regional Areas
- Migration Summary

Population Profile Summary

User Population Analysis

The table on the following page ranks the proposed Primary Service Areas within the Billings Area by User Population growth quantity.

- For Contract Health Service Delivery Areas (CHSDA) Counties, the projected population is based on an IHS HQ interpretation of growth based on County data from US Census data and analysis of Native American birth and death certificates. The growth rates are re-published annually by IHS HQ.
- For Service Areas not within CHSDAs, the growth rates for county population is based strictly on US Census projections by County for Montana.
- Growth rate varies by Service Area. Rocky Boy, the fastest growing Service Area is forecasted to grow by 32.97%, while Butte's User Population is anticipated to decline by 2.9 % over the 2001 to 2012 time frame.
- The User Population Growth is simply the projected 2012 population minus the 2001 population. Dividing this column by 1000 will provide a simple rule of thumb solution to additional medical provider (Doctor, physician assistant, Nurse Practitioner or Midwife).
- Rocky Boy, Lame Deer, Southern Flathead, Browning are all anticipated to grow by 1000 users over the 2001-2012 time span.
- The Non-Service Unit row compiles those communities remotely located from all points of service, through out the two state Area.
- Plentywood is a new Service Area for consideration and is located in the North East Section of the Fort Peck Service Unit. Its communities are typically more then an hour from their available point of care.

The maps on the following page show the distribution of User Population by County and by Zip Code relative to facility locations and driving time perimeters. Red circles represent 30 mile primary care access perimeters and blue circles represent 60 mile hospital/ER access perimeters.

- The User Population by County and by Zip indicates that Great Falls of Cascade County, MT; has the most significant User Population outside the 30 mile perimeter.
- To a lesser degree, Glasgow and Valley County, MT; Kalispell and its surrounds, Lewis and Clark County, MT ; Phillips County, MT; Sanders County, MT; and Sheridan and Natrona County, WY
- The Flathead, Fort Peck, and Wind River Service Units as well as the Great Falls Area are areas of significant population that do not have direct care inpatient care within the 60 mile access perimeter.

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User Population Growth by Rank by PSA

Service Area	Service Areas with Hospital, Health Center, or Urban Program	2001 User Pop	2012 User Pop	User Pop Growth %	User Pop Growth	Growth Rank
Rocky Boy	HC	4,337	5,767	32.97%	1,430	1
Lame Deer	HC	6,400	7,477	16.84%	1,077	2
Southern Flathead	HC	5,837	6,884	17.94%	1,047	3
Browning	H	10,267	11,276	9.83%	1,009	4
Poplar	HC	4,528	5,272	16.43%	744	5
Crow	H	5,260	6,001	14.09%	741	6
Ft. Washakie	HC	5,738	6,433	12.11%	695	7
Northern Flathead	HC	3,454	4,056	17.43%	602	8
Billings	UP	2,353	2,925	24.31%	572	9
Arapahoe	HC	4,043	4,548	12.49%	505	10
Wolf Point	HC	3,999	4,490	12.28%	491	11
Ft. Belknap	H	2,830	3,288	16.18%	458	12
Lodge Grass	HC	2,804	3,217	14.71%	413	13
Hays	HC	1,613	1,873	16.12%	260	14
Heart Butte	HC	912	1,074	17.76%	162	15
Missoula	UP	1,153	1,300	12.73%	147	16
Pryor	HC	1,000	1,141	14.09%	141	17
Helena	UP	215	252	17.03%	37	18
Non-Service Unit	*	522	542	3.83%	20	19
Casper		182	192	5.49%	10	20
Kalispell		420	423	0.71%	3	21
Great Falls	UP	1,108	1,111	0.27%	3	22
Butte	UP	117	114	-2.90%	-3	23
Phillips		294	261	-11.22%	-33	24
Totals		**69,386**	**79,915**	**15.18%**	**10,529**	

H	*=Hospital (24/7)*
HC	*=Health Center*
UP	*=Urban Program*

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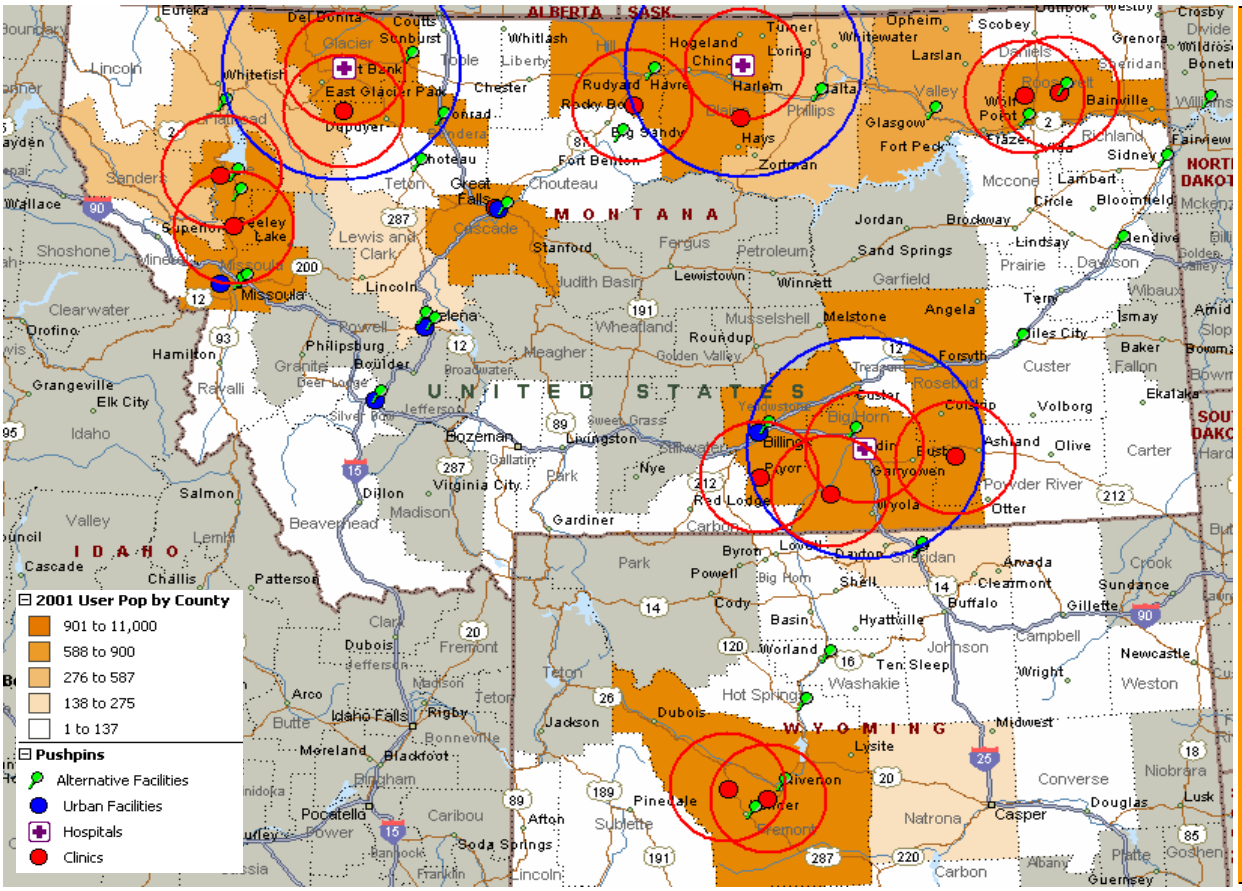
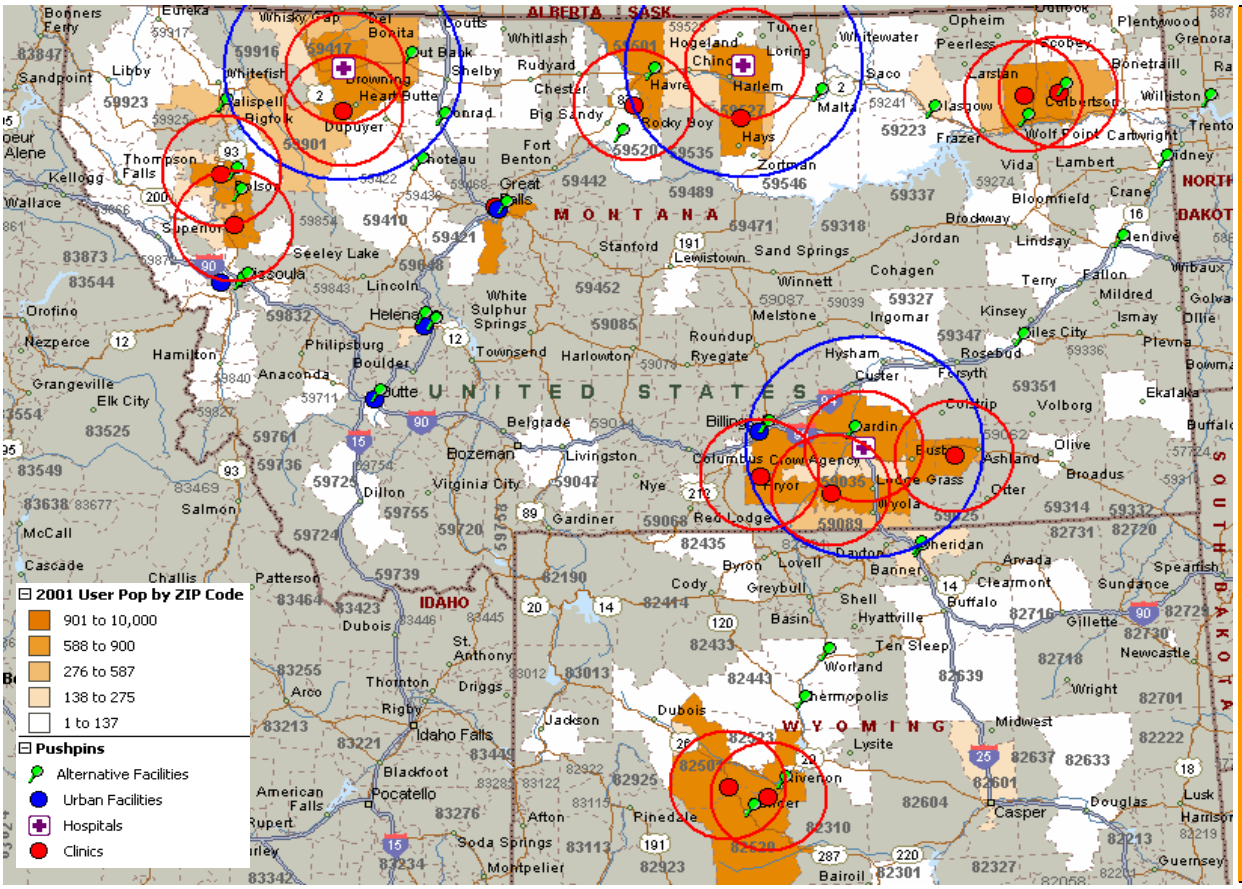


2001 User Population by County



2001 User Population by Zip Code

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Service Population Analysis

The table on the following page outlines the User Population and Service Population by County throughout the Billings Area for the years 2001 and 2012. The goal of this table is to identify underserved populations that could be considered when selecting needed additional Primary Care Service Areas.

- The User Population is the number of actual unique users of the IHS/tribal healthcare system in the past three years by County.
- The following counties have greater then 138 Users of the IHS system and do not have an IHS or tribal primary care assets within the county.

Yellowstone, MT*	Sheridan, WY	Valley, MT
Cascade, MT*	Natrona, WY	Sanders, MT
Missoula, MT	Flathead, MT	
Lewis Clark, WY	Phillips, MT	

*Limited Urban Program Primary Care Assets

- The Service Population is the number of Native American people. These numbers are based on an IHS HQ interpretation of growth interpreted from US Census County data and analysis of Native American birth and death certificates. The growth rates are re-published annually by IHS HQ. IHS publishes the white cell numbers in these columns.
- The shaded cells in these Service Population columns indicate 2000 census populations of Native Americans pulled directly from the US Census bureau by The Innova Group. These numbers are projected to 2001 and 2012 consistent with the US Census projection for a County. .
- The User Pop to Service Pop column indicates the percentage of Native Americans from a county who are using the IHS/tribal health care system. The Counties in yellow reflect locations where the User Population is less then 60% of the Service Population.
- If the historical rate of utilization by Native Americans use of the IHS/tribal system remains the same, the Un-served Service Population column indicates the quantity of Native Americans likely not to be served by the system in a specific county in the year 2012. Counties with greater then 300 potential additional Users are as follows:

Yellowstone, MT	Cache, Utah	Campbell, WY
Cascade, MT	Flathead, MT	Ravalli, MT
Weber, UT	Gallatin, MT	Sweetwater, WY
Missoula, MT	Silver Bow, MT	
Lewis-Clark, MT	Natrona, WY	

The map on the following page, in addition to providing travel distances between significant locations in the Area, also indicates the Counties with the largest growth anticipated between 2001-2012.

- Yellowstone County is the only County anticipating greater then 1000 Service population growth that does not have primary care assets.

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State	County	Total 2001 User Pop	2001 Service Pop	2012 Service Pop	Service Pop Growth	Service Pop Growth Rate	User Pop to Service Pop	2012 Proj. User Pop	Unserved Service Pop
Montana	Yellowstone *UP	2,351	4,601	5,720	1,119	24.32%	51.1%	2,923	2,797
Montana	Cascade *UP	1,082	3,349	3,356	7	0.21%	32.3%	1,084	2,272
Utah	Weber	7	1,532	1,911	379	24.74%	0.5%	9	1,902
Montana	Missoula *UP	1,046	2,305	2,577	272	11.80%	45.4%	1,169	1,408
Montana	Lewis-Clark *UP	218	1,145	1,340	195	17.03%	19.0%	255	1,085
Utah	Cache	0	541	702	161	29.76%	0.0%	0	702
Montana	Flathead	447	1,144	1,152	8	0.70%	39.1%	450	702
Montana	Gallatin	70	612	722	110	17.97%	11.4%	83	639
Montana	Silver Bow *UP	79	684	664	-20	-2.92%	11.5%	77	587
Wyoming	Natrona	176	689	726	37	5.37%	25.5%	185	541
Wyoming	Campbell	31	324	363	39	12.04%	9.6%	35	328
Montana	Ravalli	74	330	420	90	27.27%	22.4%	94	326
Wyoming	Sweetwater	48	373	355	-18	-4.83%	12.9%	46	309
Montana	Richland	16	206	243	37	17.96%	7.8%	19	224
Montana	Lincoln	47	224	234	10	4.46%	21.0%	49	185
Montana	Chouteau	17	219	196	-23	-10.50%	7.8%	15	181
Wyoming	Sheridan	162	297	370	73	24.58%	54.5%	202	168
Wyoming	Carbon	39	197	192	-5	-2.54%	19.8%	38	154
Montana	Park	14	145	161	16	11.03%	9.7%	16	145
Montana	Beaverhead	3	132	141	9	6.82%	2.3%	3	138
Montana	Phillips	298	446	396	-50	-11.21%	66.8%	265	131
Montana	Toole	37	164	161	-3	-1.83%	22.6%	36	125
Montana	Deer Lodge	35	163	157	-6	-3.68%	21.5%	34	123
Wyoming	Converse	4	111	118	7	6.31%	3.6%	4	114
Wyoming	Sublette	1	85	113	28	32.94%	1.2%	1	112
Montana	Custer	40	145	148	3	2.07%	27.6%	41	107
Wyoming	Hot Springs	61	132	181	49	37.12%	46.2%	84	97
Montana	Dawson	10	109	106	-3	-2.75%	9.2%	10	96
Montana	Valley	843	938	909	-29	-3.09%	89.9%	817	92
Wyoming	Weston	1	83	82	-1	-1.20%	1.2%	1	81
Montana	Teton	21	97	99	2	2.06%	21.6%	21	78
Wyoming	Big Horn	11	84	88	4	4.76%	13.1%	12	76
Wyoming	Lincoln	13	84	89	5	5.95%	15.5%	14	75
Montana	Carbon	8	75	83	8	10.67%	10.7%	9	74
Wyoming	Crook	0	59	63	4	6.78%	0.0%	0	63
Montana	Mineral	35	74	81	7	9.46%	47.3%	38	43
Montana	Sheridan	41	70	101	31	44.29%	58.6%	59	42
Wyoming	Johnson	19	46	51	5	10.87%	41.3%	21	30
Montana	Powder River	8	32	30	-2	-6.25%	25.0%	8	23
Montana	McCone	2	23	21	-2	-8.70%	8.7%	2	19
Wyoming	Washakie	27	45	44	-1	-2.22%	60.0%	26	18
Montana	Carter	1	8	17	9	112.50%	12.5%	2	15
Montana	Liberty	4	11	11	0	0.00%	36.4%	4	7
Montana	Sanders	557	561	609	48	8.56%	99.3%	605	4
Montana	Prairie	3	6	6	0	0.00%	50.0%	3	3
Montana	Daniels	17	17	28	11	64.71%	100.0%	28	0
Montana	Treasure	35	19	21	2	10.53%	184.2%	39	-18
Montana	Pondera *HC	1,026	850	1,001	151	17.76%	120.7%	1,208	-207
Montana	Hill *H	4,318	3,807	5,069	1,262	33.15%	113.4%	5,749	-680
Montana	Roosevelt *HC	7,608	6,751	7,841	1,090	16.15%	112.7%	8,836	-995
Montana	Blaine *HC	4,439	3,261	3,789	528	16.19%	136.1%	5,158	-1,369
Montana	Rosebud *HC	5,337	3,594	4,219	625	17.39%	148.5%	6,265	-2,046
Montana	Glacier *H	10,153	8,163	8,958	795	9.74%	124.4%	11,142	-2,184
Wyoming	Fremont *HC	9,720	7,746	8,684	938	12.11%	125.5%	10,897	-2,213
Montana	Big Horn *H	9,915	7,926	9,044	1,118	14.11%	125.1%	11,314	-2,270
Montana	Lake *HC	8,707	5,578	6,604	1,026	18.39%	156.1%	10,309	-3,705
	Totals	**69,282**	**70,412**	**80,567**	**10,155**	**14.42%**	**98.40%**	**79,812**	

*UP-Urban Program; *HC-Health Care; *H-Hospital

Gray cells contain service population created by correlating 2000 state census data projections with the present ratio of Natives to county population. White cells contain user and service population numbers from the HSP. Yellow cells identify a 1997 user to service population ratio less than 80%.

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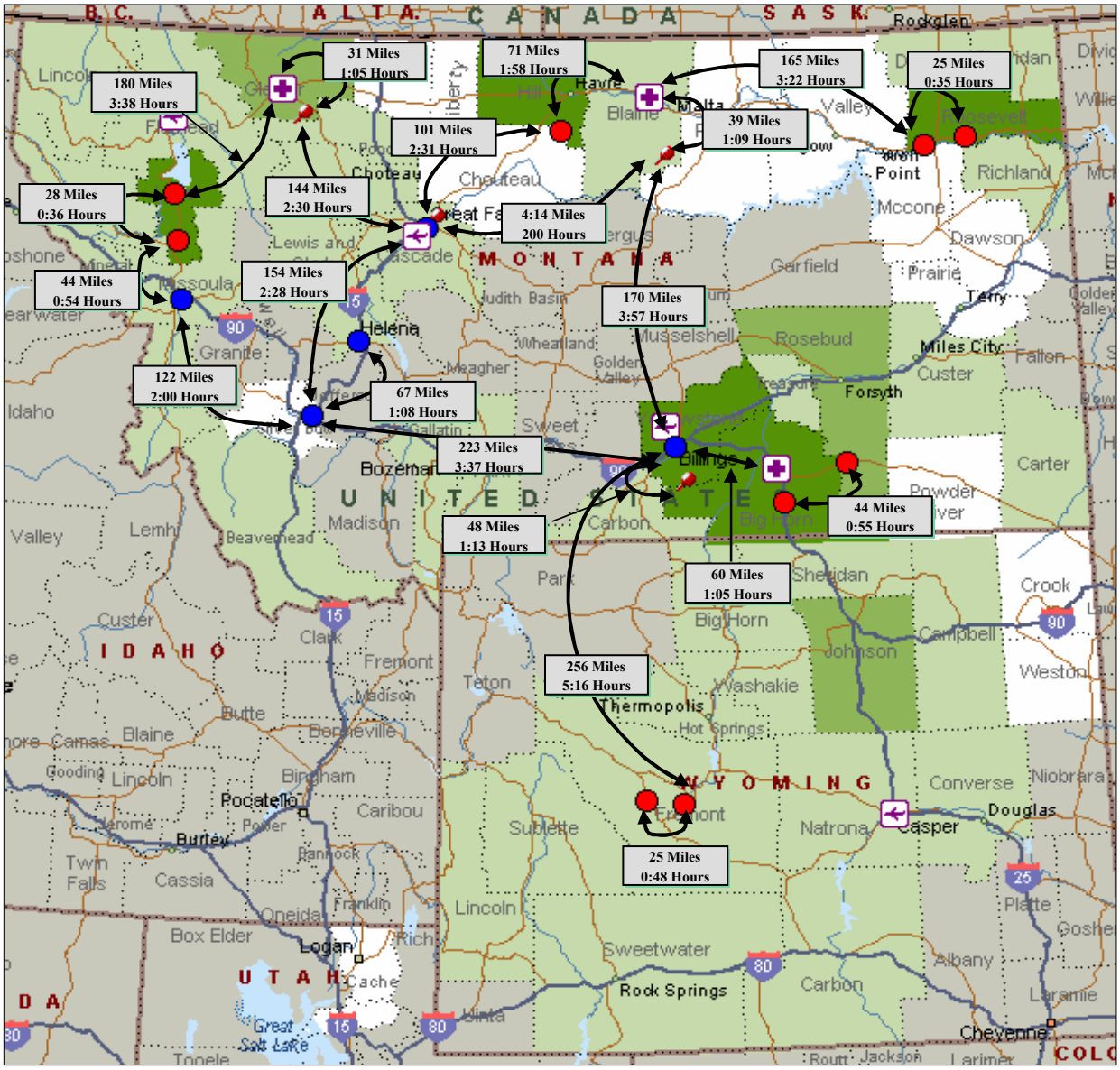
Service Population Growth 2001-2012 by County



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Payor Profile Summary

At the kick-off meeting in October, one of the Characteristics suggested as a priority determinant was a Service Area's socio-economic barriers to care. This can be measured in many ways, but identifying the Payor Profile mix of the population and determining whether the population is CHS eligible are two means to measure the reliance the population has on the IHS/Tribal Health Care System.

The table on the following page profiles the population's ability to be reimbursed for care based on the FY 1999-2001 provider visits by each Primary Service Area's communities of residence. It also identifies the percentage of provider visits from a PSA that are not CHS eligible. Populations with a high number of Non-CHS eligible visits are likely to put a greater demand on the IHS/tribal health care system.

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- The percentage of primary care visits by payor type is indicated adjacent to the number of visits for that payor.
- The Other Third Party column indicates the number and percentage of visits that have source of payment beyond or different then Medicaid or Medicare. For instance this would include personal or employment offered private insurance coverage.
- The Total Third Party column represents a sum of all third party eligibility, Medicare + Medicaid + Other Third Party + Vets.
- The Uninsured column indicates the number and percentage of visits provided for which there was no payment source identified. The five pink cells indicate those Service Areas with the greatest percentage of unpaid visits.
- The Non-CHS Eligible column indicates the percentage of the population that are served at the facility that are not eligible for Contract Health Coverage if specialty care is required. The blue represents those with the smallest percentage, while the pink indicates the greatest percentage. While the percentage is telling, the number is also extremely important when you see the number of visits with Non-CHS eligibility at Crow and Browning.

The work group may state that one criteria for future resource allocation priority might be the percentage of uninsured population in a Service Area. Unfortunately this might lead an organization to not enroll its population in available insurance programs. Other Areas just might not be as competent enrolling members in appropriate programs. We will need to discuss these realities as we consider criteria in future meetings to determine whether this is or is not an appropriate criteria to determine future resource allocation.

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Service Area	Medicaid		Medicare		Other 3rd Party		Veteran		Total 3rd Party		Uninsured		3 Year Provider Visit Total	Non-CHS Eligible	
	#	%	#	%	#	%	#	%	#	%	#	%		#	%
Arapahoe Health Center	6,485	8%	4,775	6%	6,148	7%	244	0%	17,652	21%	64,726	79%	82,378	4,483	5%
Billings - Indian Health Board of Billings	558	2%	775	3%	1,611	6%	111	0%	3,055	11%	25,994	89%	29,049	20,569	71%
Browning - Blackfeet Community Hospital	13,801	6%	17,076	7%	8,491	3%	365	0%	39,733	16%	207,880	84%	247,613	122,757	50%
Butte - North American Indian Alliance	3	0%	-	0%	-	0%	-	0%	3	0%	767	100%	770	725	94%
Crow-Northern Cheyenne Hospital	8,267	6%	7,949	5%	10,219	7%	271	0%	26,706	18%	118,860	82%	145,566	56,728	39%
Ft. Belknap Health Center	3,623	4%	6,231	7%	6,228	7%	1,076	1%	17,158	20%	66,728	80%	83,886	21,269	25%
Ft. Washakie Health Center	8,166	7%	7,946	6%	10,436	8%	418	0%	26,966	22%	98,100	78%	125,066	7,633	6%
Great Falls - Indian Family Health Clinic	162	2%	204	2%	69	1%	11	0%	446	4%	10,245	96%	10,691	9,494	89%
Hays Health Clinic	2,288	4%	5,844	11%	3,308	6%	549	1%	11,989	23%	40,771	77%	52,760	6,512	12%
Heart Butte Health Center	1,103	4%	1,785	7%	678	3%	122	0%	3,688	15%	20,896	85%	24,584	11,864	48%
Helena - Helena Indian Alliance	-	0%	-	0%	20	1%	-	0%	20	1%	1,829	99%	1,849	1,729	94%
Lame Deer Health Center	6,761	4%	8,964	5%	8,009	5%	354	0%	24,088	14%	143,450	86%	167,538	18,135	11%
Lodge Grass Health Center	4,053	6%	5,149	8%	4,794	7%	44	0%	14,040	21%	54,056	79%	68,096	28,715	42%
Missoula - Missoula Indian Center	213	3%	471	6%	451	6%	60	1%	1,195	15%	6,772	85%	7,967	5,012	63%
Polson Health Center	28	1%	11	0%	48	1%	15	0%	102	2%	4,746	98%	4,848	3,754	77%
Poplar - Vern E. Gibbs Health Center	13	1%	282	19%	424	29%	6	0%	725	50%	724	50%	1,449	145	10%
Pryor Health Center	3,822	8%	7,413	16%	8,778	19%	426	1%	20,439	43%	26,645	57%	47,084	3,954	8%
Rocky Boy Health Center	17,561	14%	10,522	9%	10,521	9%	1,339	1%	39,943	33%	81,972	67%	121,915	5,555	5%
St. Ignatius Health Center	1,208	5%	1,725	7%	2,565	10%	120	0%	5,618	23%	19,041	77%	24,659	8,488	34%
Wolf Point - Chief Redstone Clinic	10,612	12%	5,911	7%	4,603	5%	383	0%	21,509	24%	67,131	76%	88,640	14,242	16%
Total	88,727	7%	93,033	7%	87,401	7%	5,914	2%	275,075	21%	1,061,333	79%	1,336,408	351,763	26%

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Survey Summary

The following pages bring together all the questionnaire responses having to do with regionalization (questions 9-13) and the Service Distribution Template (question #18).

Question #18 – Please indicate where the threshold is for accessibility to quality care for the following list of services.

The tables on the following pages indicate the tally of desires from the health center or hospital respondents, for the distribution of product lines into the three levels of care requested in the survey. The facilities typically responded from their own facility's perspective, thus hospitals typically responded as if their own Primary Service Area was a Regional Center. The table below is a synthesis of those responses and will guide us as we consider services for each Area.

All Services will be considered based on the population supported. Justification of the yellow highlighted services will be difficult at the access threshold defined. The template below is a guideline of desire.

	Primary Service Area	Within 30 minutes	Within 60 minutes
Physician Care	Family Practice Internal Medicine Pediatric Obstetrics Gynecology Psychiatry Nephrology Dental Rheumatology Traditional Healing Oral Surgery	General Surgery Cardiology	Orthopedics Ophthalmology Dermatology ENT Urology Neurology Allergy Pulmonary Gerontology Gastroenterology Oncology Other Surgical Subspecialties Other Medicine Subspecialties Pediatric Subspecialties
ER	After Hours Urgent Care Emergency Ground Ambulances	Air Ambulances - Rotor	Air Ambulances - Fixed
Ambulatory Services	Nutrition Optometry Podiatry Dialysis Audiology		Chiropractic
OP Beh. Health	Mental Health Social Services Substance Abuse Transitional Domestic Alcohol and Substance Abuse	Medical Detox	
Elder Care	Long Term Care Nursing Assisted Living Hospice Home Health Care		
Ancillary Services	Lab Specimen Collection Clinical Lab Microbiology Radiography Ultrasound - Obstetrics Screening Mammography Mammography Physical Therapy Occupational Therapy Speech Therapy Pharmacy	Medical Oncology Radiation Oncology Ultrasound CT Fluoroscopy Nuclear Medicine Respiratory Therapy Outpatient Endoscopy Outpatient Surgery Inpatient Surgery	Anatomical Pathology MRI
Inpatient Care	Pediatrics	Labor and Delivery Acute Care - Medical Intensive Care Sub Acute Care Acute Dialysis Adolescent Substance Abuse Adult Substance Abuse Psychiatric – Low Acuity	L&D – High Risk Acute Care - Surgical Psychiatric – High Acuity
Other Services	Case Management Environmental Services Preventive Care Community Health Representatives Transportation		

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Service should be provided, or is acceptable if available... (see code below)

Product Lines		Health Centers & Urban Programs					Hospitals				
		within the Primary Service Area.	in 30 minutes or less.	in 60 minutes.	in greater than 60 minutes.	in greater than 120 minutes.	within the Primary Service Area.	in 30 minutes or less.	in 60 minutes.	in greater than 60 minutes.	in greater than 120 minutes.
Physician Care	Family Practice	**12**					**3**				
	Internal Medicine	**10**	2				**3**				
	Pediatric	**12**					**3**				
	Obstetric	**9**	2	1			**3**				
	Gynecology	**10**	1	1			**3**				
	Orthopedics	3	1	**5**	3		**3**				
	Ophthalmology	1	2	**7**	2		1		**2**		
	Dermatology	2	3	**4**	1	2			**2**		1
	Psychiatry	**7**	1	3	1		1		**2**		
	General Surgery		**6**	4	2		1		**2**		
	Otolaryngology	2	**5**	**5**			1		**2**		
	Cardiology		**7**	4	1		1		**2**		
	Urology		2	**7**	2	1			**2**		1
	Neurology		2	**8**	2				**2**		1
	Nephrology	**6**		4	2		**1**	**1**	**1**		
	Allergy	2	2	**6**		2	**1**		**1**		**1**
	Pulmonology	2	2	**6**	2		**1**		**1**		**1**
	Gerontology	3	3	**5**	1		**2**		1		
	Gastroenterology		3	**7**	2				**2**		1
	Rheumatology	**4**	2	**4**	1	1	**1**		**1**		**1**
	Oncology		**6**	4	1	1			**2**		1
	Traditional Healing	**8**	2	1	1		**3**				
	Other Surgical Subspecialties			**7**	2	3			**2**		
	Other Medicine Subspecialties			**7**	2	3			**2**		
	Pediatric Subspecialties	1	1	**6**	1	3	**1**	**1**	**1**		
	Dental	**12**					**3**				
	Oral Surgery	**5**	2	4	1		**1**		**1**		**1**
Emergency / Urgent Care	Urgent Care	**12**					**3**				
	Emergency	**8**	4				**3**				
	Ground Ambulance	**7**	3	2			**3**				
	Air Ambulance: Rotor	2	**5**	4	1		**2**		1		
	Air Ambulance: Fixed Wing	1	**3**	**3**	1	2	**1**		**1**		
Ambulatory Services	Nutrition	**12**					**3**				
	Optometry	**10**	1	1			**3**				
	Podiatry	**10**	1	1			**3**				
	Dialysis	**7**	2	2	1		**3**				
	Audiology	**9**		2		1	**3**				
	Chiropractic	3	**4**	**4**	1		**1**		**1**		**1**

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Product Lines		Service should be provided, or is acceptable if available... (see code below)									
		Health Centers & Urban Programs					Hospitals				
		within the Primary Service Area.	in 30 minutes or less.	in 60 minutes.	in greater than 60 minutes.	in greater than 120 minutes.	within the Primary Service Area.	in 30 minutes or less.	in 60 minutes.	in greater than 60 minutes.	in greater than 120 minutes.
Outpatient Behavioral Health	Mental Health	**12**					**3**				
	Social Services	**10**	1	1			**3**				
	Alcohol & Substance Abuse	**9**	3				**3**				
	Substance Abuse Transitional Care	**8**	3	1			**3**				
	Medical Detox	4	**5**	2		1	**3**				
Elder Care	Skilled Nursing	**6**	3	2	1		**2**	1			
	Assisted Living	**7**	3	1	1		**2**	1			
	Hospice	**6**	3	2	1		**2**	1			
	Home Health Care	**8**	3		1		**2**	1			
Ancillary Services	Lab Specimen Collection	**12**					**3**				
	Clinical Lab	**8**	1	2	1		**2**		1		
	Microbiology Lab	**8**		2	2		**3**				
	Anatomical Pathology	**5**	1	3	2	1	**1**		**1**		**1**
	Radiographic	**9**		2	1		**3**				
	Ultrasound - Obstetrics	**8**	2	1	1		**3**				
	Ultrasound Level II	3	**4**	2	2		**3**				
	Mammography	**5**	3	3	1		**3**				
	Screening Mammography	**5**	3	2	1		**2**				1
	Fluoroscopy	3	**5**	1	2		**3**				
	CT	**4**	**4**	1	3		**3**				
	MRI	2	**5**	4	1		**2**		1		
	Nuclear Medicine	1	**5**	3	3		**1**		**1**		**1**
	Radiation Oncology	2	**5**	3	2		**1**		**1**		**1**
	Medical Oncology (Chemo)	2	**5**	3	2		**1**		**1**		**1**
	Pharmacy	**12**					**3**				
	Physical Therapy	**9**	2	1			**3**				
	Occupational Therapy	**4**	3	2	3		**1**	**1**	**1**		
	Speech Therapy	**4**	3	2	3		**1**		**1**		**1**
	Respiratory Therapy	3	**6**	2			**2**		1		
	Outpatient Endoscopy	2	**6**	2	2		**1**		**1**	**1**	
	Outpatient Surgery		**6**	3	3		**2**		1		
	Inpatient Surgery		**5**	3	3		**2**		1		

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Service should be provided, or is acceptable if available... (see code below)

Product Lines		Health Centers & Urban Programs					Hospitals				
		within the Primary Service Area.	in 30 minutes or less.	in 60 minutes.	in greater than 60 minutes.	in greater than 120 minutes.	within the Primary Service Area.	in 30 minutes or less.	in 60 minutes.	in greater than 60 minutes.	in greater than 120 minutes.
Inpatient Care	Labor & Delivery	**5**	**5**	2	1		**3**				
	Labor & Delivery - Low Risk	**5**	**5**	1	1		**3**				
	Labor & Delivery - High Risk	1	**6**	5			1		**2**		
	Medical Inpatient	**5**	**5**	2			**3**				
	Surgical Inpatient	3	**4**	**4**	1		**2**		1		
	Pediatric	**6**	4	2			**3**				
	Intensive Care	1	**7**	4				1	**2**		
	Sub-Acute Transitional Care	4	**6**	2			**2**		1		
	Acute Dialysis	4	**5**	2	1		**2**		1		
	Adolescent Substance Abuse	**4**	**4**	2	1	1	**1**	**1**	**1**		
	Adult Substance Abuse	**4**	**4**	2	1	1	**1**	**1**	**1**		
	Psychiatric - Low Acuity	**4**	**4**	2	1	1	**2**		1		
	Psychiatric - High Acuity		**5**	4			1		**2**		
Other Services Requested	Case Management	**8**	1	2	1		**3**				
	Environmnetal Health	**7**	1	2	2		**3**				
	Transportation	**11**			1		**3**				
	Public Health Nursing	**12**					**3**				
	Public Health Nutrition	**12**					**3**				
	Health Education	**11**	1				**3**				
	Community Health Representative	**12**					**3**				
Additional Sercices											

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9. Are there communities or geographic groups of communities that are specifically underserved relative to access to primary care? If so, please list the communities grouped by geography.

Arapahoe	Arapahoe Ranch (Thermopolis area, on reservation) – 20-30 *uniques (perhaps up to 60 in summer, 75 miles away.* Crowheart area – 150-200 *uniques, all ranching community so spread out.*
Billings	*They are supposed to serve Billings. There are communities (Laurel, Columbus, etc.) with Natives they will serve if they can get to town, but they can't transport them and they are outside of Billing's SOW.*
Blackfoot	Babbs & Seville
Butte Urban	
Crow	Yes. They are Wyola, St. Xavier and Ft. Smith. (Tribal Health) Pryor – isolated with no local ambulance service. Wyola – isolated with no local ambulance service *(30 miles south)* . Ft. Smith – isolated with no local ambulance service *(45-50 miles southwest)* .
Ft. Belknap	1. Lodge Pole Community – No Clinic, Hospital, Ambulance Services or local direct care. 2. Hays Community - No 24-hour ER Services. 3. Dodson Community – No Clinic, Hospital, Ambulance Services or local direct care. 4. Agency Community – No Specialty Clinics, blood bank, access to immediate surgery, OB services, airstrip landing services. 5. Beaver Creek/Zortman Communities – No Clinic, Hospital, Ambulance Services or local direct care.
Ft. Washakie	Arapahoe Ranch (Thermopolis area, on reservation) – 20-30 *uniques (perhaps up to 60 in summer, 75 miles away.* Crowheart area – 150-200 *uniques, all ranching community so spread out. We face "mountain passes" for any way we go to get out of this area. About 45 miles away.*
Great Falls Urban	
Hays	1. Lodge Pole Community – No Clinic, Hospital, Ambulance Services or local direct care. 2. Hays Community - No 24-hour ER Services. 3. Dodson Community – No Clinic, Hospital, Ambulance Services or local direct care. 4. Agency Community – No Specialty Clinics, blood bank, access to immediate surgery, OB services, airstrip landing services. 5. Beaver Creek/Zortman Communities – No Clinic, Hospital, Ambulance Services or local direct care.
Heart Butte	Babb, St. Mary
Helena Urban	
Lame Deer	Kirby is the most likely area. (N. Cheyenne Board of Health) Ashland, Busby, Birney, Muddy (CHRs) Birney, Busby, Ashland & outlined areas.
Lodge Grass	There are outlying communities and geographic groups of communities that are specifically underserved relative to access to primary care. These communities have generally been described in Item 2 & 9 above. Barriers to serving the primary care needs include rural isolation from Lodge Grass, poor road conditions, limited food, lack of dependable & timely ambulance service, limited interpreters such as Spanish, German dialect for the Hutterite Colony outside of Lodge Grass, which does have access to the Emergency Room facilities in Lodge Grass as well as the non-Indian community. Examples of isolation of rural & groups of rural communities include approximately: Community — IHS Service Population Lodge Grass 1848 St. Xavier 178 Wyola 379 Fort Smith 115 The service population data can be reflected to the fact that the average monthly clinical service for the Lodge Grass Health Center ranges from 299 to 380 patients per month over a 10-month period. *They used tribal numbers above to justify Head Start.*
Missoula Urban	Missoula Pre-Release Clients, Native men and women.(underserved) Lack of IHS services, Residential Chemical Dependency Services(inpatient tx) for native adults and or adolescents.
Poplar	Basically all of our service area is considered remote, isolated and underserved.
Pryor	Pryor residents aren't offered Psychiatry, Derm, Ortho, Cardiology, Rheumatology, and Physical therapy, occupational therapy. Pryor doesn't have a grocery store or any means in town to buy milk, fresh fruit and vegetables, bread, etc. in the grocery line. No competitive gas station (one, with prices sky high) it is 40 miles to the nearest gas station and grocery store.
Wolf Point	Basically all of our service area is considered remote, isolated and underserved.

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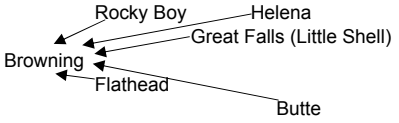
	10. Considering your neighboring tribes and service units, where is the natural location for a regional center that would allow for increased and better quality services to be provided to the area? Who would be the participating tribes and Service Units?	**11. Of your present services you offer locally, which services would qualitatively benefit by being located in a regional center?**	**12. Which of the services you presently refer to a distant referral center do you believe could be adequately provided in a regional center, or at your facility?**
Arapahoe	The natural location for a regional center would be Ethete, Wyoming, which is located midway between Arapahoe and Fort Washakie. Participating tribes/service unit would be: · Eastern Shoshone tribe · Northern Arapahoe tribe · Wind River Service Unit	The benefits of having all our services under one roof, i.e. we could combine staff and see more patients using extended hours. Programs would be more cohesive and would feel much more like a team. Financial benefits would be gained from having only one facility to maintain.	· Physical Therapy · Occupational therapy · Cardiovascular rehabilitation · 8-bed psychiatric care center · Addiction specialist · Dental department providing conscious IV sedation for children · Increased dental services · Orthopedics (have a lot of deferred
Billings	Crow Agency		Xray, dental, mammograms, pre-natal, adolescent SA tox Center, halfway house for adults (30+) and youth (15+).
Blackfoot		Hot overreaching today – Risk Management is what this is about.	· Orthopedics · ENT · Ophthalmologist
Butte Urban	· Four urban programs are clustered with Butte and Helena in the center and Missoula and Great Falls on the periphery.		
Crow	I think the most natural setting for a regional center would be at the Crow Service Unit in Crow Agency MT. There are two major highways intersecting Crow, I-90 and Hwy 212, as well as a local airport in Hardin MT 14 miles north. The Crow service unit is relatively new, completed in 1995. There is room for expansion; also in the immediate (sic) is a 40 bed nursing home, as well as a state certified Dialysis center. The local tribes in the immediate area are the Crow and the Northern Cheyenne. (Tribal Health) The Northern Cheyenne Reservation is east and adjacent to the Crow reservation. Other tribes have benefited from the services at the Crow/Northern Cheyenne Hospital. Patients from Ft. Belknap, Ft. Peck and Ft. Washakie receive surgical and specialty services from the Crow/Northern Cheyenne Hospital.	A regional youth treatment center Regional detox center	Substance abuse treatment center (inpatient)
Ft. Belknap	Fort Belknap Indian Reservation is centrally located on U.S. Highway #2 1. Fort Belknap – Assiniboine & Gros Ventre Tribes. 2. Fort Peck – Assiniboine & Sioux Tribes. 3. Rocky Boy – Chippewa & Cree Tribes. 4. Browning – Blackfeet Tribe. 5. Urban Centers in Northern Montana 6. Little Shell 7. Descendents	· Using allied health programs from the Fort Belknap College, medical programs can be expanded to Registered Nurses programs for recruitment for specialty clinics to benefit the communities. · Convalescence care such as swing bed care, care after surgery, wound care, etc. · Assisted living care for the elderly. · Full time ALS service.	· OB Services. · Pre-Natal Services. · Cardiac Services. · All Surgeries. · Complete Radiology Services. · Dental – Orthodontic Services. · Ophthalmology Services.
Ft. Washakie	The natural location for a regional center would be Ethete, Wyoming, which is located midway between Arapahoe and Fort Washakie. Participating tribes/service unit would be: · Eastern Shoshone tribe · Northern Arapahoe tribe · Wind River Service Unit	The benefits of having all our services under one roof, i.e. we could combine staff and see more patients using extended hours. Programs would be more cohesive and would feel much more like a team. Financial benefits would be gained from having only one facility to maintain.	· Physical Therapy · Occupational therapy · Cardiovascular rehabilitation · 8-bed psychiatric care center · Addiction specialist · Dental department providing conscious IV sedation for children · Increased dental services

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	10. Considering your neighboring tribes and service units, where is the natural location for a regional center that would allow for increased and better quality services to be provided to the area? Who would be the participating tribes and Service Units?	**11. Of your present services you offer locally, which services would qualitatively benefit by being located in a regional center?**	**12. Which of the services you presently refer to a distant referral center do you believe could be adequately provided in a regional center, or at your facility?**
Great Falls Urban		· Combined coalition of Indian Urban Health. FQHC in process. Health Center $ could be matching dollars (330). Phase 1 –start up, phase 2, expansion.	
Hays	Fort Belknap Indian Reservation is centrally located on U.S. Highway #2 1. Fort Belknap – Assiniboine & Gros Ventre Tribes. 2. Fort Peck – Assiniboine & Sioux Tribes. 3. Rocky Boy – Chippewa & Cree Tribes. 4. Browning – Blackfeet Tribe. 5. Urban Centers in Northern Montana 6. Little Shell 7. Descendents	· Using allied health programs from the Fort Belknap College, medical programs can be expanded to Registered Nurses programs for recruitment for specialty clinics to benefit the communities. Convalescence care such as swing bed care, care after surgery, wound care, etc. · Assisted living care for the elderly. · Full time ALS service.	· OB Services. · Pre-Natal Services. · Cardiac Services. · All Surgeries. · Complete Radiology Services. · Dental – Orthodontic Services. · Ophthalmology Services.
Heart Butte	Great Falls (2 hours from Heart Butte and 2 hours from Browning) Blackfeet, Ft. Belknap, and Rocky Boy	All – Basic Family Care	· Heart · Surgery · GI procedures · Labs - clinical · Ortho
Helena Urban			· Pharmacy, Neuro-metric testing, Medical De-Tox, Acute Mental Health, Radiology, Half-Way hose, Transitional Living, Referral Specialty Care, Laser Therapy, Ophthalmology, Optometry, Dental Care
Lame Deer	Crow Agency Hospital Crow Tribe and Northern Cheyenne Tribe (CHRs): Crow Cheyenne Health Services Unit, where we are already using for services.	ER Services ** presently staffing & qualification in this service are being tested daily.* (CHRs) Lame Deer Community Health is centralized for each of our districts. (Media) It would be great to have local Diabetes services (Dialysis Center) and local residential treatment center for alcohol and drug problems.	Specialized x-ray studies and cardiac testing, would be nice to have at CAH (Crow Agency Hospital) rather than sending to Billings. *X-Ray services – Flouroscopy, Barium Enema* *Cardiac – Stress testing* (CHRs) Need of a mammography machine. More extensive lab work, so they won't have to be sent to Crow or Billings (especially X-Ray: after hours or ER service you usually have to wait a day or go to Crow). More specialists to come once a month.
Lodge Grass	The natural location for the regional center, which would allow for increased and better quality services would be Billings, which is approximately 85 miles from Lodge Grass. Local housing and lodging care is a problem for patients, in Billings, who are from the rural isolated communities on the Crow Indian Reservation. The participating tribes and Service Units would include the Crow Tribe, the Northern Cheyenne Tribe, the Shoshone & Arapahoe Tribes in Wyoming and their corresponding Service Units. *Split decision with Crow. Crow would need significant "buffing up". That would be defined as additional services indicated below in question 11.*	Several services offered locally would qualitatively benefit by being located in a regional center. These are identified herein but the point must be made that the additional location in the regional center would not lessen the need for local service in the community. The additional services which would be located in the regional center would include: improved dialysis center, cardiology, CT scan, MRI, cancer treatment, high risk obstetric care, trauma care.	See #11

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	10. Considering your neighboring tribes and service units, where is the natural location for a regional center that would allow for increased and better quality services to be provided to the area? Who would be the participating tribes and Service Units?	**11. Of your present services you offer locally, which services would qualitatively benefit by being located in a regional center?**	**12. Which of the services you presently refer to a distant referral center do you believe could be adequately provided in a regional center, or at your facility?**
Missoula Urban	· Regional Center in Missoula. Salish & Kootenai. The tribe usually provides contract care for their enrolled members from providers in Missoula.	· Would like Missoula to be a regional center. Missoula would be a perfect as a regional center due to the geographical location of tribes in Montana.	
Poplar	There is no natural location for a regional center. However, consideration might be given to cooperative efforts with the North Dakota tribes and service units. *They have better access to the Aberdeen Area (Dakotas) for synergy than the Billings Area (Sioux and Assiniboine are intermingled… Poplar more Sioux, Wolf Point more* Assiniboine.)	It would benefit us to have cardiac consultants back on our campus.	If a surgeon was available locally, we would be able to keep more locally instead of referring to Billings or Great Falls our major referral centers. Williston and Glasgow do get some of our less intense cases.
Pryor	Billings, MT Participating tribes: Crow, Northern Cheyenne, Arapaho, Sioux	· Substance Abuse · Mental Health · Prenatal Care with ultrasound, full time lab and nutritionist · Cardiology · Dialysis · Neurology · Cancer treatment	· Cardiology · Ortho if x-ray was present · Rheumatology if lab updated. · Dental relief and dental surgery · Dialysis
Wolf Point	There is no natural location for a regional center. However, consideration might be given to cooperative efforts with the North Dakota tribes and service units. *They have some patients from Ft. Belknap that come over for ultrasounds and endocrinology. But regionalization would be difficult.*	It would benefit us to have cardiac consultants back on our campus.	If a surgeon was available locally, we would be able to keep more locally instead of referring to Billings or Great Falls our major referral centers. Williston and Glasgow do get some of our less intense cases.

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13. Please describe your local EMS and 911 services.

Arapahoe	911 Service is available through the Fremont County EMS. Ambulance call to our clinics are responded to by the Riverton EMS for Arapahoe Health Center and by the Lander EMS for Fort Washakie Health Center. The local first responders are volunteers in the Fort Washakie area. There are no first responders in any of the Arapahoe area.
Billings	All local from Billings.
Blackfoot	· 911 Service is managing dispatching · EMS centralized at Browning · 1 Crew on at a time (BLS) – No radio Pre-hospital program Inter Hospital Program (call crew)
Butte Urban	
Crow	Local EMS service is provided by contract with Big Horn County. 911 service is primarily provided by Big Horn County, some from BIA LES.
Ft. Belknap	1. Non-enhanced 911 services to Blaine County Sheriffs Office. 2. EMS dispatched out by E.R. by staff nurses. 3. Licensed Volunteer BLS (basic life support) Services. 4. Unlicensed Volunteer services at Hays.
Ft. Washakie	911 Service is available through the Fremont County EMS. Ambulance call to our clinics are responded to by the Riverton EMS for Arapahoe Health Center and by the Lander EMS for Fort Washakie Health Center. The local first responders are volunteers in the Fort Washakie area. There are no first responders in any of the other reservation communities.
Great Falls Urban	
Hays	1. Non-enhanced 911 services to Blaine County Sheriffs Office. 2. EMS dispatched out by E.R. by staff nurses. 3. Licensed Volunteer BLS (basic life support) Services. 4. Unlicensed Volunteer services at Hays.
Heart Butte	Non-existent and non-responsive unless your lucky day. One might respond after "5" golden minutes. Blackfeet Community hospital EMS might respond
Helena Urban	
Lame Deer	Our local EMS has 4 paramedics, 2 intermediates, and over a dozen EMTs. Paramedics are on an "as available" service and are limited by Montana Law (Problems when leaving the Indian Nation) as to what they can do compared to national protocols. The 911 calls are handled by the local BIA police and medical calls are relayed to the EMS dispatcher. Not necessarily the caller but the message itself. *(Ernestine's Description from Adl. Svs.) Advanced life support service with 3 ALS equipped ambulances, 3 full time paramedics, 1 sub paramedic, 1 EMT intermediate, 10 EMT basics, 1 FRA, 4 emergency medical dispatchers, 1 Rescue/extrication truck, 2 trained techs. 911 system is housed at BIA LES.* *All located within the Lame Deer community.*
Lodge Grass	EMS personnel are stationed at Lodge Grass from 4:30 pm to 7:30 am. There are no immediate EMS personnel in Lodge Grass from 7:30 am to 4:30 pm. When EMS is dispatched to Lodge Grass for an emergency they either arrive from Hardin that is approximately 35 miles or Crow Agency that is approximately 20 miles from Lodge Grass. 911 services are available through Big Horn County Dispatch.
Missoula Urban	
Poplar	EMS is provided by local volunteers, trained and supervised by local hospital. IHS helps with ambulances, equipment, etc. Strong need for more trained volunteers. Then could train present to higher level. *Often personnel arrive with lack of training or equipment (ie: a lifepack). Poplar EMS is poor. Need a uniform way of delivering EMS services. Tribe and IHS need to play a joint role in the delivery of EMS. This issue is a significant one for this remote area.* 911 is a cooperative effort between Ft. Peck Tribes and Roosevelt County. Good cooperative relationship between law and order agencies. Cross-deputization. *Seen as a leader in this. The 911 service is good.*
Pryor	We call 911 that activates the Billings, MT services. It takes at least 1 hour for ambulance response at the minimum. The same for the police. If we use Help, flight time is 15 minutes.
Wolf Point	EMS is provided by local volunteers, trained and supervised by local hospital. IHS helps with ambulances, equipment, etc. Strong need for more trained volunteers. Then could train present to higher level. 911 is a cooperative effort between Ft. Peck Tribes and Roosevelt County. Good cooperative relationship between law and order agencies. Cross-deputization.

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Recommended Primary Service Areas

The current Billings Area consists of 15 Primary Care Service Areas and 5 Urban program (2 of which offer limited Primary Care). As part of this study we were asked to identify a Service Area for the Little Shell tribe as well as potentially other new Service Areas. In order to define new service areas, the work Group provided a number of clues in their stated priority determinants at the Kick off meeting. Those applicable to this discussion are:

- Lack of access to Core Health Services
- Areas with population growth
- Areas with the least resources
- Areas where you can make the greatest impact
- Service Areas with High needs and low access

Generally this translates to a criteria for new service areas as "underserved areas with a significant population". The table on the opposite page looks at this general goal through 6 specific criteria filters in order to find places consistently identified as underserved.

The first column identifies those counties from the Service population analysis with potentially greater then 300 un-served users by 2012. These counties are also mapped on the following page with the orange color.

The second column, also from the Service Population Analysis identifies those counties with greater then 138 users but have no IHS or tribal health care facilities.

The third column from analysis of the User Population map identifies counties of greater then 138 users beyond the thirty mile primary care access standard.

The fourth column identifies communities, which fell out of the analysis of actual vs. predicted provider visits. (See appendix C). Communities identified are those communities

- which experienced more than 250 visits below the predicted and which were more than 50% below the predicted (larger populations) or (mapped with red dot)
- which were below the 50% predicted visit threshold (smaller communities, mapped with red dot) and
- exist in the underserved counties of column one (See the map on the following page.)

The fifth column contains communities, which were found to be of a population greater than 200, and which were geographically isolated, (greater than 70 miles) either by distance or geographical features, from current IHS health care assets.

The sixth column identifies communities mentioned by the Work Group from the questionnaire.

The seventh column lists our recommendations for new PSAs in that they were all listed at least three times within the 6 column analysis. It is our recommendation that new Primary Care Areas be established in Kalispell, Phillips County (Malta centered), and Casper (urban program), that a Great Falls/Little Shell PSA be created in conjunction with that Urban Program and that direct primary care assets be strengthened in the new urban PSA communities of Billings, Great Falls, Helena and Missoula.

Please review the grouping of communities for each of the proposed 23 PSAs on the pages labeled Service Area Community Assumptions following the referenced map and chart.

Elimination Discussions

- Babb/St. Mary only met the geographical criteria.
- Valley County's population base is close to Wolf Point.
- Sidney was eliminated due to its minimal 2001 User Population.

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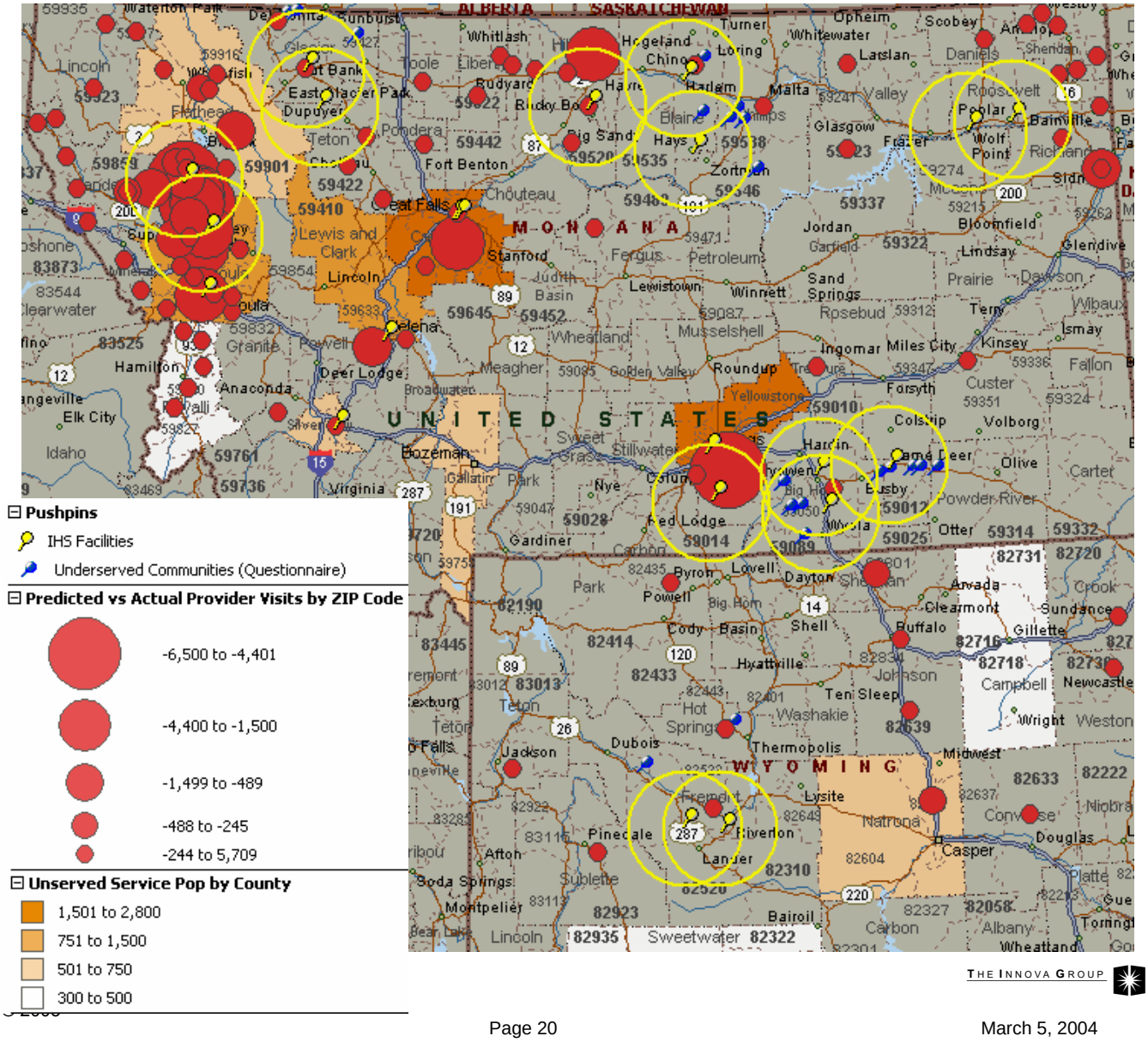
- Silver Bow County only meets one criteria and has a relatively small User Population. Strengthen the Urban Program in Butte will address this underserved area.
- Ashland appears to be effectively served by the Lame Deer Service Unit (only a difference of 29 visits from predicted, or –1%).
- Beaver Creek had a small population and was over predicted visits.
- Birney was also over predicted visits and has appropriate access to Lame Deer.
- Busby was well over predicted visits (19%), and served by Lame Deer.
- Crowheart was over predicted visits and is apparently well served by Ft. Washakie.
- Cut Bank/Seville, while a larger population, is close to Browning and easily accessible on good highway.
- Dodson's small population was a drawback for further consideration.
- Kirby had a very small population.
- Lodge Pole appears to be well served in the Hays Unit, over the predicted visits by 46%.
- Mudy Cluster has a small population and is well over the predicted visits by 200 visits.
- St. Xavier is just below the expected visits and is supported by the Crow Service Unit.
- Thermopolis has a small User Population.
- Wyola is 40 Interstate miles from the Crow Service Unit.
- Gallitin, Weber, Campbell, Ravalli and Sweetwater Counties only met one criteria
- Plentywood had a small User Population



Underserved Communities and Counties

Counties with Un-served Populations of >300	Counties with >138 User Pop with no IHS assets	County User Pop >138 & beyond 30 mile Primary Care access	Communities with % Provider Visits below Expected, with Service Pop >300	Isolated Communities with User Pop >200	Work Group Input - Mentioned in Questionnaire	Recommend For New PSAs
				Babb (322) St. Mary (9)	Ashland, MT (1,003) Babb, MT (322) St. Mary, MT (9) Beaver Creek, WY (55)	
Yellowstone, MT (2,797)	Yellowstone, MT (2923)		Billings (57%)			Billings, MT
					Birney, MT (120) Busby, MT (1,135)	
Silver Bow, MT (587)						
Natrona, WY (541)	Natrona, WY (185)	Natrona County	Casper (63%)			Casper, WY
Gallatin, MT (639)					Crowheart, WY (176) Cut Bank, MT (748) Seville, MT (0)	
	Sanders, MT (605)	Sanders, MT	.		Ft. Smith, MT (154)	
Cascade, MT (2,272)	Cascade, MT (1084)	Cascade, MT	Great Falls (82%)	Great Falls (1,046)		Great Falls, MT
Cache, Utah (702)						
Lewis & Clark, MT (1,085)	Lewis & Clark, MT (255)	Lewis & Clark, MT	Helena (92%)	Helena (248)		Helena, MT
Flathead, MT (702)	Flathead, MT (450)	Flathead, MT	Kalispell (77%) East Glacier (40%)	Kalispell (289)		Kalispell, MT
					Kirby, MT (11) Lodge Grass, MT (2,363) Lodge Pole, MT (387)	
Missoula, MT (1,408)	Missoula, MT (1169)		Missoula (88%)	Missoula (1,073)	Missoula, MT (1,073)	Missoula, MT
	Sheridan, WY (202)	Sheridan, WY		Plentywood (17) Sidney (12)	Mudy Cluster, MT (56) St. Xavier, MT (183) Thermopolis, WY (82).	
	Valley, MT (817)	Valley, MT			Wyola, MT (498)	
	Phillips, MT (265)	Phillips, MT			Zortman, MT (12)	Phillips, MT
Weber, UT (1,902) Campbell, WY (328) Ravalli, MT (326) Sweetwater, WY (309)						

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Service Unit	Primary Service Area	County	Community	State Code	County Code	Community Code	Zip Code	2001 User Pop
	ARAPAHOE							**4,043**
WIND RIVER	Arapahoe	FREMONT	ARAPAHOE	56	7	760	82510	1,776
	Arapahoe	FREMONT	BONNEVILLE	56	7	761	82649	0
WIND RIVER	Arapahoe	HOT SPRINGS	GEBO	56	9	800	82443	0
WIND RIVER	Arapahoe	HOT SPRINGS	HAMILTON DOM	56	9	802	82443	1
WIND RIVER	Arapahoe	FREMONT	HUDSON	56	7	769	82515	29
WIND RIVER	Arapahoe	FREMONT	RIVERTON	56	7	775	82501	1,898
WIND RIVER	Arapahoe	FREMONT	SHOSHONI	56	7	777	82649	24
WIND RIVER	Arapahoe	FREMONT	ST STEPHENS	56	7	776	82524	255
WIND RIVER	Arapahoe	HOT SPRINGS	THERMOPOLIS	56	9	804	82443	60
	BILLINGS							**2,353**
	Billings	YELLOWSTONE	BALLANTINE	30	56	100	59006	1
CROW	Billings	YELLOWSTONE	BILLINGS	30	56	640	59101	2,296
CROW	Billings	YELLOWSTONE	LAUREL	30	56	641	59044	54
	Billings	CARBON	ROBERTS	30	5	61	59070	2
	BROWNING							**10,267**
BLACKFEET	Browning	GLACIER	BABB	30	18	200	59411	293
BLACKFEET	Browning	GLACIER	BADGER	30	18	201	59417	7
BLACKFEET	Browning	GLACIER	BLACKFOOT	30	18	202	59417	7
BLACKFEET	Browning	PONDERA	BRADY	30	37	420	59416	4
BLACKFEET	Browning	GLACIER	BROWNING	30	18	203	59417	8,834
BLACKFEET	Browning	PONDERA	CONRAD	30	37	421	59425	33
BLACKFEET	Browning	GLACIER	CUT BANK	30	18	205	59427	682
BLACKFEET	Browning	GLACIER	EAST GLACIER	30	18	206	59434	249
BLACKFEET	Browning	GLACIER	SANTA RITA	30	18	208	59427	5
	Browning	GLACIER	SEVILLE	30	18	211	59427	0
BLACKFEET	Browning	GLACIER	ST MARY	30	18	207	59411	8
BLACKFEET	Browning	GLACIER	STARR SCHOOL	30	18	209	59417	68
BLACKFEET	Browning	PONDERA	VALIER	30	37	424	59486	77
	BUTTE							**117**
NON-SERVICE UNIT	Butte	DEER LODGE	ANACONDA	30	12	160	59711	35
NON-SERVICE UNIT	Butte	SILVER BOW	BUTTE	30	47	4	59701	79
	Butte	BEAVERHEAD	DILLON	30	1	6	59725	3
	CASPER							**182**
NON-SERVICE UNIT	Casper	NATRONA	CASPER	56	13	840	82601	176
NON-SERVICE UNIT	Casper	CONVERSE	DOUGLAS	56	5	740	82633	4
NON-SERVICE UNIT	Casper	JOHNSON	KAYCEE	56	10	821	82639	2
	CROW							**5,395**
CROW	Crow	TREASURE	BIG HORN	30	52	600	59010	18
CROW	Crow	BIG HORN	BLACK LODGE	30	2	1	59031	7
CROW	Crow	BIG HORN	CROW AGENCY	30	2	3	59022	3,585
CROW	Crow	BIG HORN	GARRYOWEN	30	2	12	59031	204
CROW	Crow	BIG HORN	HARDIN	30	2	4	59034	1,269
CROW	Crow	TREASURE	HYSHAM	30	52	601	59038	17
CROW	Crow	BIG HORN	ST XAVIER	30	2	8	59075	160
CROW	Lodge Grass	BIG HORN	YELLOWTAIL	30	2	11	59035	135
	FT. BELKNAP							**2,830**
FORT BELKNAP	Ft. Belknap	BLAINE	BEAVER CREEK	30	3	30	59524	47

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Service Unit	Primary Service Area	County	Community	State Code	County Code	Community Code	Zip Code	2001 User Pop
FORT BELKNAP	Ft. Belknap	BLAINE	CHINOOK	30	3	31	59523	145
FORT BELKNAP	Ft. Belknap	BLAINE	FT. BELKNAP AGENCY	30	3	50	59526	1,932
FORT BELKNAP	Ft. Belknap	BLAINE	HARLEM	30	3	32	59526	608
	Ft. Belknap	BLAINE	HOGELAND	30	3	35	59529	2
FORT BELKNAP	Ft. Belknap	BLAINE	MILK RIVER VALLEY	30	3	37	59526	96
FORT BELKNAP	Ft. Belknap	BLAINE	SAVOY	30	3	38	59526	0
FORT BELKNAP	Ft. Belknap	BLAINE	TURNER	30	3	39	59542	0
	FT. WASHAKIE							**5,738**
WIND RIVER	Ft. Washakie	FREMONT	BOULDER FLAT	56	7	762	82514	214
WIND RIVER	Ft. Washakie	FREMONT	BURRIS	56	7	763	82512	5
WIND RIVER	Ft. Washakie	FREMONT	CROWHEART	56	7	764	82512	157
WIND RIVER	Ft. Washakie	FREMONT	DUBOIS	56	7	766	82513	21
WIND RIVER	Ft. Washakie	FREMONT	ETHETE	56	7	767	82520	1,965
WIND RIVER	Ft. Washakie	FREMONT	FT WASHAKIE	56	7	768	82514	2,258
WIND RIVER	Ft. Washakie	FREMONT	KINNEAR	56	7	770	82516	236
WIND RIVER	Ft. Washakie	FREMONT	LANDER	56	7	771	82520	680
WIND RIVER	Ft. Washakie	FREMONT	MORTON	56	7	772	82516	9
WIND RIVER	Ft. Washakie	FREMONT	NORTH FORK	56	7	773	82514	75
WIND RIVER	Ft. Washakie	FREMONT	PAVILLION	56	7	774	82523	64
WIND RIVER	Ft. Washakie	SUBLETTE	PINEDALE	56	18	102	82941	0
WIND RIVER	Ft. Washakie	FREMONT	SOUTH FORK	56	7	778	82514	53
WIND RIVER	Ft. Washakie	FREMONT	WIND RIVER	56	7	780	82520	1
	GREAT FALLS							**1,106**
NON-SERVICE UNIT	Great Falls	LEWIS-CLARK	AUGUSTA	30	25	300	59410	3
NON-SERVICE UNIT	Great Falls	CASCADE	BLACK EAGLE	30	7	80	59414	23
NON-SERVICE UNIT	Great Falls	TETON	CHOTEAU	30	50	560	59422	20
	Great Falls	TETON	DUTTON	30	50	561	59433	0
NON-SERVICE UNIT	Great Falls	CASCADE	CASCADE	30	7	81	59421	15
NON-SERVICE UNIT	Great Falls	TETON	FAIRFIELD	30	51	580	59442	1
NON-SERVICE UNIT	Great Falls	CASCADE	GREAT FALLS	30	7	82	59405	1,044
	HAYS							**1,613**
FORT BELKNAP	Hays	BLAINE	HAYS	30	3	33	59527	823
FORT BELKNAP	Hays	BLAINE	HAYS-RURAL	30	3	34	59527	453
FORT BELKNAP	Hays	PHILLIPS	LANDUSKY	30	36	401	59524	4
FORT BELKNAP	Hays	BLAINE	LODGE POLE	30	3	36	59524	333
	HEART BUTTE							**912**
BLACKFEET	Heart Butte	PONDERA	DUPUYER	30	37	422	59432	9
BLACKFEET	Heart Butte	PONDERA	HEART BUTTE	30	37	423	59448	903
	HELENA							**215**
	Helena	LEWIS-CLARK	CANYON FERRY	30	25	301	59602	0
NON-SERVICE UNIT	Helena	LEWIS-CLARK	EAST HELENA	30	25	302	59635	3
NON-SERVICE UNIT	Helena	LEWIS-CLARK	HELENA	30	25	303	59601	212
	KALISPELL							**420**
FLATHEAD	Kalispell	FLATHEAD	COLUMBIA FALLS	30	15	181	59912	81
FLATHEAD	Kalispell	FLATHEAD	HUNGRY HORSE	30	15	182	59919	8
FLATHEAD	Kalispell	FLATHEAD	KALISPELL	30	15	183	59901	287
FLATHEAD	Kalispell	FLATHEAD	WEST GLACIER	30	15	184	59936	6
FLATHEAD	Kalispell	FLATHEAD	WHITEFISH	30	15	185	59937	38

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Service Unit	Primary Service Area	County	Community	State Code	County Code	Community Code	Zip Code	2001 User Pop
	LAME DEER							**6,400**
NORTH CHEYENNE	Lame Deer	ROSEBUD	ASHLAND	30	44	500	59003	854
NORTH CHEYENNE	Lame Deer	ROSEBUD	BIRNEY	30	44	501	59043	102
	Lame Deer	POWDER RIVER	BROADUS	30	38	25	59317	8
NORTH CHEYENNE	Lame Deer	BIG HORN	BUSBY	30	2	2	59016	995
NORTH CHEYENNE	Lame Deer	ROSEBUD	COLSTRIP	30	44	502	59323	172
NORTH CHEYENNE	Lame Deer	CARTER	EKALAKA	30	6	101	59324	1
NORTH CHEYENNE	Lame Deer	ROSEBUD	FORSYTH	30	44	503	59327	28
NORTH CHEYENNE	Lame Deer	BIG HORN	KIRBY	30	2	5	59016	10
NORTH CHEYENNE	Lame Deer	ROSEBUD	LAME DEER	30	44	504	59043	4,162
NORTH CHEYENNE	Lame Deer	BIG HORN	MUDY CLUSTER	30	2	10	59043	49
NORTH CHEYENNE	Lame Deer	BIG HORN	ROSEBUD	30	44	505	59043	19
	LODGE GRASS							**2,669**
CROW	Lodge Grass	BIG HORN	LODGE GRASS	30	2	6	59050	2,071
CROW	Lodge Grass	SHERIDAN	SHERIDAN	56	17	850	82801	162
CROW	Lodge Grass	BIG HORN	WYOLA	30	2	9	59089	436
	MISSOULA							**1,153**
NON-SERVICE UNIT	Missoula	MINERAL	ALBERTON	30	31	360	59820	18
FLATHEAD	Missoula	MISSOULA	BONNER	30	32	380	59823	5
FLATHEAD	Missoula	MISSOULA	CLINTON	30	32	381	59825	10
NON-SERVICE UNIT	Missoula	RAVALLI	CORVALLIS	30	41	450	59828	9
NON-SERVICE UNIT	Missoula	RAVALLI	DARBY	30	41	451	59829	2
FLATHEAD	Missoula	MISSOULA	EVARO	30	32	387	59808	28
FLATHEAD	Missoula	MISSOULA	FRENCHTOWN	30	32	382	59834	16
NON-SERVICE UNIT	Missoula	RAVALLI	FLORENCE	30	41	452	59833	17
NON-SERVICE UNIT	Missoula	RAVALLI	HAMILTON	30	41	453	59840	22
FLATHEAD	Missoula	MISSOULA	LOLO	30	32	383	59847	17
FLATHEAD	Missoula	MISSOULA	MILLTOWN	30	32	384	59851	1
FLATHEAD	Missoula	MISSOULA	MISSOULA	30	32	385	59801	960
FLATHEAD	Missoula	MISSOULA	SEELEY LAKE	30	32	386	59868	9
NON-SERVICE UNIT	Missoula	RAVALLI	STEVENSVILLE	30	41	454	59870	24
NON-SERVICE UNIT	Missoula	MINERAL	SUPERIOR	30	31	362	59872	15
	NON-SERVICE UNIT							**522**
NON-SERVICE UNIT	Non-Service Unit	LINCOLN	AFTON	56	12	102	83001	13
	Non-Service Unit	CARTER	ALZADA	30	6	102	59311	0
	Non-Service Unit	SUBLETTE	BIG PINEY	56	18	101	83113	0
	Non-Service Unit	SUBLETTE	BIG SANDY	56	18	100	82901	0
	Non-Service Unit	SUBLETTE	BONDURANT	56	18	106	83001	1
	Non-Service Unit	GALLATIN	BOZEMAN	30	16	7	59715	70
NON-SERVICE UNIT	Non-Service Unit	JOHNSON	BUFFALO	56	10	820	82834	17
	Non-Service Unit	CARTER	CAPITOL	30	6	104	57724	0
	Non-Service Unit	SUBLETTE	CORA	56	18	103	82941	0
	Non-Service Unit	RICHLAND	CRANE	30	42	880	59262	0
	Non-Service Unit	SUBLETTE	DANIEL	56	18	104	83115	0
	Non-Service Unit	PARK	DRY CREEK RA	56	7	765	82433	0
NON-SERVICE UNIT	Non-Service Unit	LINCOLN	EUREKA	30	27	340	59917	6
	Non-Service Unit	PRAIRIE	FALLON	30	40	3	89326	1
NON-SERVICE UNIT	Non-Service Unit	CAMPBELL	GILLETTE	56	3	710	82716	31

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Service Unit	Primary Service Area	County	Community	State Code	County Code	Community Code	Zip Code	2001 User Pop
NON-SERVICE UNIT	Non-Service Unit	DAWSON	GLENDIVE	30	11	5	59330	10
	Non-Service Unit	HOT SPRINGS	GRASS CREEK	56	9	801	82443	0
NON-SERVICE UNIT	Non-Service Unit	SWEETWATER	GREEN RIVER	56	19	860	82935	19
	Non-Service Unit	CARTER	HAMMOND	30	6	103	59316	0
	Non-Service Unit	HOT SPRINGS	KIRBY	56	9	803	82443	0
NON-SERVICE UNIT	Non-Service Unit	LINCOLN	LIBBY	30	27	341	59923	37
NON-SERVICE UNIT	Non-Service Unit	PARK	LIVINGSTON	30	34	10	59047	14
NON-SERVICE UNIT	Non-Service Unit	BIG HORN	LOVELL	56	2	700	82435	11
	Non-Service Unit	SUBLETTE	MARBLETON	56	18	107	83113	0
	Non-Service Unit	SUBLETTE	MERNA	56	18	105	83002	0
NON-SERVICE UNIT	Non-Service Unit	CUSTER	MILES CITY	30	9	120	59301	40
	Non-Service Unit	MONTANA UNK	MONTANA UNK	30	99	930	59457	73
	Non-Service Unit	CROOK	MOORCROFT	56	6	750	82721	0
NON-SERVICE UNIT	Non-Service Unit	WESTON	NEWCASTLE	56	23	900	82723	1
NON-SERVICE UNIT	Non-Service Unit	TETON	PENDROY	30	50	562	59467	1
NON-SERVICE UNIT	Non-Service Unit	CARBON	RAWLINS	56	4	720	82301	39
NON-SERVICE UNIT	Non-Service Unit	LINCOLN	REXFORD	30	27	342	59930	2
	Non-Service Unit	CARTER	RIDGE	30	6	100	59332	0
NON-SERVICE UNIT	Non-Service Unit	SWEETWATER	ROCK SPRINGS	56	19	861	82901	27
NON-SERVICE UNIT	Non-Service Unit	TOOLE	SHELBY	30	51	581	59474	32
NON-SERVICE UNIT	Non-Service Unit	MINERAL	ST REGIS	30	31	361	59866	2
	Non-Service Unit	TOOLE	SUNBURST	30	51	582	59482	4
NON-SERVICE UNIT	Non-Service Unit	CROOK	SUNDANCE	56	6	751	82729	0
NON-SERVICE UNIT	Non-Service Unit	SWEETWATER	SUPERIOR	56	19	862	82945	2
NON-SERVICE UNIT	Non-Service Unit	PRAIRIE	TERRY	30	40	2	59349	2
NON-SERVICE UNIT	Non-Service Unit	LINCOLN	TROY	30	27	880	59874	2
	Non-Service Unit	WIBAUX	WIBAUX	30	55	200	59353	0
NON-SERVICE UNIT	Non-Service Unit	WASHAKIE	WORLAND	56	22	870	82401	27
	Non-Service Unit	WYOMING UNK	WYOMING UNK	56	99	956	82801	38
	NORTHERN FLATHEAD							**3,454**
FLATHEAD	Northern Flathead	LAKE	BIG ARM	30	24	271	59910	36
FLATHEAD	Northern Flathead	FLATHEAD	BIG FORK	30	15	180	59911	27
FLATHEAD	Northern Flathead	SANDERS	CAMAS	30	45	520	59845	5
FLATHEAD	Northern Flathead	LAKE	DAYTON	30	24	273	59914	45
FLATHEAD	Northern Flathead	LAKE	ELMO	30	24	274	59915	205
FLATHEAD	Northern Flathead	SANDERS	HOT SPRING	30	45	522	59845	257
FLATHEAD	Northern Flathead	SANDERS	NIARADA	30	45	523	59845	26
FLATHEAD	Northern Flathead	LAKE	PABLO	30	24	275	59855	1,132
FLATHEAD	Northern Flathead	LAKE	POLSON	30	24	276	59860	1,329
FLATHEAD	Northern Flathead	LAKE	POLSON-RURAL	30	24	277	59860	392
	Northern Flathead	LAKE	SWAN LAKE	30	24	281	59911	0
	PHILLIPS							**294**
FORT BELKNAP	Phillips	PHILLIPS	DODSON	30	36	400	59524	138
FORT BELKNAP	Phillips	PHILLIPS	MALTA	30	36	402	59538	122
FORT BELKNAP	Phillips	PHILLIPS	SACO	30	36	403	59261	5
FORT BELKNAP	Phillips	PHILLIPS	WAGNER	30	36	404	59538	0
FORT BELKNAP	Phillips	PHILLIPS	WHITEWATER	30	36	405	59544	15
FORT BELKNAP	Phillips	PHILLIPS	ZORTMAN	30	36	406	59546	14

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Service Unit	Primary Service Area	County	Community	State Code	County Code	Community Code	Zip Code	2001 User Pop
	POPLAR							**4,528**
FORT PECK	Poplar	ROOSEVELT	BAINVILLE	30	43	470	59212	5
FORT PECK	Poplar	ROOSEVELT	BLAIR	30	43	471	59218	8
FORT PECK	Poplar	ROOSEVELT	BROCKTON	30	43	472	59213	451
	Poplar	ROOSEVELT	CHELSEA	30	43	473	59255	0
FORT PECK	Poplar	ROOSEVELT	CULBERTSON	30	43	474	59218	54
FORT PECK	Poplar	SHERIDAN	DAGMAR	30	46	874	59219	6
FORT PECK	Poplar	RICHLAND	FAIRVIEW	30	42	875	59221	6
	Poplar	DANIELS	FLAXVILLE	30	10	2	59222	1
FORT PECK	Poplar	ROOSEVELT	FORT KIPP	30	43	475	59213	218
FORT PECK	Poplar	ROOSEVELT	FROID	30	43	476	59226	32
FORT PECK	Poplar	SHERIDAN	HOMESTEAD	30	46	876	59242	14
	Poplar	RICHLAND	LAMBERT	30	42	881	59243	0
	Poplar	RICHLAND	MCCABE	30	42	882	59226	0
FORT PECK	Poplar	SHERIDAN	MEDICINE LAKE	30	46	540	59247	8
FORT PECK	Poplar	SHERIDAN	OUTLOOK	30	46	541	59252	0
FORT PECK	Poplar	SHERIDAN	PLENTYWOOD	30	46	542	59254	12
FORT PECK	Poplar	ROOSEVELT	POPLAR	30	43	478	59255	3,673
	Poplar	SHERIDAN	RAYMOND	30	46	877	59254	0
FORT PECK	Poplar	SHERIDAN	REDSTONE	30	46	883	59257	0
FORT PECK	Poplar	SHERIDAN	RESERVE	30	43	479	59258	14
	Poplar	DAWSON	RICHEY	30	11	1	59259	0
FORT PECK	Poplar	ROOSEVELT	RIVERSIDE	30	43	480	59255	15
FORT PECK	Poplar	RICHLAND	SAVAGE	30	42	878	59252	0
FORT PECK	Poplar	RICHLAND	SIDNEY	30	42	879	59270	10
FORT PECK	Poplar	SHERIDAN	WESTBY	30	46	543	59275	1
	PRYOR							**1,000**
CROW	Pryor	CARBON	EDGAR	30	5	60	59026	6
CROW	Pryor	BIG HORN	PRYOR	30	2	7	59066	994
	ROCKY BOY							**4,339**
ROCKY BOYS	Rocky Boy	HILL	AZURE	30	21	246	59521	129
ROCKY BOYS	Rocky Boy	CHOUTEAU	BIG SANDY	30	8	100	59520	15
	Rocky Boy	HILL	BONNEAUVILLE	30	21	249	59521	0
	Rocky Boy	HILL	BONNEAUVILLE MODU	30	21	250	59521	0
ROCKY BOY	Rocky Boy	HILL	BOX ELDER	30	21	230	59521	1,011
ROCKY BOY	Rocky Boy	LIBERTY	CHESTER	30	26	320	59522	4
	Rocky Boy	HILL	COUNTRY VIEW	30	21	251	59521	0
ROCKY BOY	Rocky Boy	CHOUTEAU	DENTON	30	8	101	59430	0
ROCKY BOY	Rocky Boy	HILL	DUCK CREEK	30	21	231	59521	222
	Rocky Boy	HILL	EAST AGENCY AREA	30	21	252	59521	0
	Rocky Boy	HILL	EAST LOWER ROAD AI	30	21	255	59521	0
ROCKY BOYS	Rocky Boy	CHOUTEAU	FORT BENTON	30	8	102	59442	2
	Rocky Boy	HILL	GILDFORD	30	21	232	59525	0
ROCKY BOY	Rocky Boy	HILL	HAVRE	30	21	233	59501	914
ROCKY BOY	Rocky Boy	HILL	HAYSTACK LOGS	30	21	253	59521	0
ROCKY BOY	Rocky Boy	HILL	HINGHAM	30	21	235	59528	0
ROCKY BOY	Rocky Boy	HILL	INVERNESS	30	21	236	59530	0
ROCKY BOY	Rocky Boy	HILL	JOPLIN	30	21	237	59531	0

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ROCKY BOY	Rocky Boy	HILL	KREMLIN	30	21	238	59532	8
	Rocky Boy	HILL	LAREDO	30	21	254	59521	0
	Rocky Boy	HILL	LOWER SANGREY/BUT	30	21	256	59521	0
ROCKY BOY	Rocky Boy	HILL	NEWTOWN	30	21	239	59521	0
	Rocky Boy	HILL	NORTH HAYSTACK	30	21	234	59521	570
ROCKY BOY	Rocky Boy	HILL	NORTH PARKER SCHO	30	21	241	59521	300
	Rocky Boy	HILL	NORTH SANGREY	30	21	257	59521	0
ROCKY BOY	Rocky Boy	HILL	PARKER CANYON ROA	30	21	240	59521	105
	Rocky Boy	HILL	POST PLANT ROAD	30	21	259	59521	0
	Rocky Boy	HILL	PRAIRIE VIEW	30	21	258	59521	0
ROCKY BOY	Rocky Boy	HILL	ROCKY BOY AGENCY	30	21	242	59521	304
ROCKY BOY	Rocky Boy	HILL	RUDYARD	30	21	243	59528	2
ROCKY BOY	Rocky Boy	HILL	SANGREY	30	21	244	59521	753
	Rocky Boy	HILL	SOUTH HAYSTACK	30	21	260	59521	0
	Rocky Boy	HILL	SOUTH PARKER SCHO	30	21	267	59521	0
	Rocky Boy	HILL	SOUTH SANGREY	30	21	261	59521	0
	Rocky Boy	HILL	ST PIERRE ROAD	30	21	262	59521	0
	Rocky Boy	HILL	SUNNYVILLE	30	21	263	59521	0
	Rocky Boy	HILL	UPPER AZURE	30	21	264	59521	0
	Rocky Boy	HILL	UPPER SANGREY/BUT	30	21	265	59521	0
	Rocky Boy	HILL	WEST LOWER ROAD A	30	21	268	59521	0
	Rocky Boy	HILL	WILD ROSE	30	21	266	59521	0
	SOUTHERN FLATHEAD							**5,837**
FLATHEAD	Southern Flathead	LAKE	ARLEE	30	24	270	59821	1,119
FLATHEAD	Southern Flathead	LAKE	CHARLO	30	24	272	59824	278
FLATHEAD	Southern Flathead	SANDERS	DIXON	30	45	521	59831	196
FLATHEAD	Southern Flathead	SANDERS	HERON	30	45	529	59844	2
FLATHEAD	Southern Flathead	LAKE	MISSION DAM	30	24	284	59865	5
FLATHEAD	Southern Flathead	SANDERS	NOXON	30	45	528	59853	3
	Southern Flathead	SANDERS	PARADISE	30	45	524	59856	2
FLATHEAD	Southern Flathead	SANDERS	PERMA	30	45	525	59859	6
FLATHEAD	Southern Flathead	SANDERS	PLAINS	30	45	526	59859	51
FLATHEAD	Southern Flathead	LAKE	RAVALLI	30	24	288	59863	33
FLATHEAD	Southern Flathead	LAKE	RONAN	30	24	278	59864	1,693
FLATHEAD	Southern Flathead	LAKE	RONAN-RURAL	30	24	279	59864	1,053
	Southern Flathead	LAKE	SCHLEY HOMES	30	24	285	59808	0
FLATHEAD	Southern Flathead	LAKE	ST IGNATIUS	30	24	280	59865	1,387
FLATHEAD	Southern Flathead	SANDERS	THOMPSON FALLS	30	45	527	59873	5
FLATHEAD	Southern Flathead	SANDERS	TROUT CREEK	30	45	530	59874	4
	WOLF POINT							**3,999**
FORT PECK	Wolf Point	MCCONE	CIRCLE	30	28	1	59215	2
FORT PECK	Wolf Point	VALLEY	FORT PECK	30	53	620	59223	4
FORT PECK	Wolf Point	VALLEY	FRAZER	30	53	621	59225	551
FORT PECK	Wolf Point	VALLEY	GLASGOW	30	53	622	59230	153
FORT PECK	Wolf Point	VALLEY	HINSDALE	30	53	623	59241	3
	Wolf Point	ROOSEVELT	MACON	30	43	477	59201	0
FORT PECK	Wolf Point	VALLEY	NASHUA	30	53	624	59248	51
FORT PECK	Wolf Point	VALLEY	OSWEGO	30	53	626	59201	75

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FORT PECK	Wolf Point	VALLEY	RICHLAND	30	53	627	59263	0
FORT PECK	Wolf Point	DANIELS	SCOBEY	30	10	140	59263	16
FORT PECK	Wolf Point	VALLEY	WIOTA	30	53	628	59248	6
FORT PECK	Wolf Point	ROOSEVELT	WOLF POINT	30	43	481	59201	3,138

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Regional Groupings

Recommended Regional Areas

Stated goals of this project are; to improve service delivery, integrate services – area wide, and bring unity – forge partnerships. These goals are intended to improve operational efficiency, better access to health care, and an improvement in the health status of our communities.

As we consider regionalization of care it is important to remember that health care is a population-based business, which means the larger the population we serve, the more services we can afford to offer. Unfortunately, pooling of populations is often contradictory to access desires of your population. The Service Access Template, as discussed earlier in this section, which provides guidance that all services should be available within 60 minutes basically eliminates the potential for regionalization beyond the present Service Units.

Billings Area weaknesses identified at the Kick-Off meeting pertaining to regionalization include: Poor Access to care and communication. Priority determinants from the meeting pertaining to regionalization included: access to specialty care, a lack of Substance Abuse, and a desire to have the greatest impact with the least cost resource. Regionalization will help, as a larger population attracts a wider segment of specialized providers. The pooling of resources regionally will help address the Substance Abuse shortages. Regionalization would lead to regional and inter-regional communication which would lead to adopting best practices in the development and operation of these programs. Communication, lack of unified automated systems, information access uniformity and fragmentation of services are symptomatic of disconnected, isolated operating units. Regional interaction will help alleviated these issues.

When searching for regional opportunities, it is important to consider:

- Access to both direct and contract care delivery options
- Proximity to Tertiary Care Centers in Montana and Wyoming
- Current and future populations within the regional boundaries
- The strength of existing IHS health care assets and strong tribal programs in the proposed regions.
- Natural and historical travel and access patterns

The migration analysis suggests that today there is very little migration between Service Units, other then some migration from Lame Deer to Crow and some Rocky Boy to Fort Belknap.

The Innova Group has outlined three Regional Scenarios on the next three pages. In each scenario we have identified the proposed region visually, the PSAs, their User Populations and the Alternative care Providers by Region.

The best advantage of the three region scenario is that the regions are designed to take care of the largest population each, and therefore take advantage of the economies of scale. The number of regions is small, so creating and managing three fledgling operating units is not a difficult task and the Area can be very flexible and adaptable to best practices as they surface and become known. Presently some migration to Browning does occur from Great Falls, while Missoula migration to Flathead is also common while not huge. Virtually no migration to Crow occurs from the Wind River Service Unit. A disadvantage is that the regions are all very large geographically, with diverse peoples who have not, historically, been interdependent. Integrating customs, practices and behaviors will be more difficult in this scenario.

The four region scenario creates a separate region for the urban programs. The benefits of the previous scenario are retained and an advantage is gained by creating a separate identity for the urban program which is somewhat different than the IHS service unit. Regional interfaces for the urban programs will

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foster new cross community representation and perspective to the urban program operations. Crosspollination of the urban programs will bring the strength of each forward to the benefit of the whole. One program is strong in substance abuse, one is stronger in youth programs, and still another has the lead in primary care delivery. By integrating these programs in a region, the communication of best practices will be a strong advantage. This scenario will contain the same basic disadvantages as the three region scenario.

The recommended scenario is the five region scenario. In this scenario, we retain the four previous regions, and recognize Wyoming as it's own region. This will solve the greatest problem of geography presented by the other scenarios. The distance to Crow as the nearest IHS Hospital is a problem of previous scenarios. A disadvantage would be creation of too many regions, but we have not yet reached that threshold. The number is large enough that we can still share best practices, but not so large that we loose the agility needed to be successful. An advantage is that five regional leadership teams will bring forward more diverse thought and courage in trying new things, and the number stays small enough that duplication of best practices is still feasible and manageable. This scenario also comes closest to the Service Access Template designed earlier in this section.

The other strength of regional development is that each region may find a niche in certain programs, and benefit from not only intra-region, but also inter-region business growth and market share. It also becomes a platform for development of Area and Regional programs in Pre-hospital care and expanded substance abuse programs. Expanded specialty care, duplication of best practices, enhanced communication, better contracting possibilities are all strong reasons for consideration of regional development.

The Innova Group recommends that the five-region scenario be pursued in this project.

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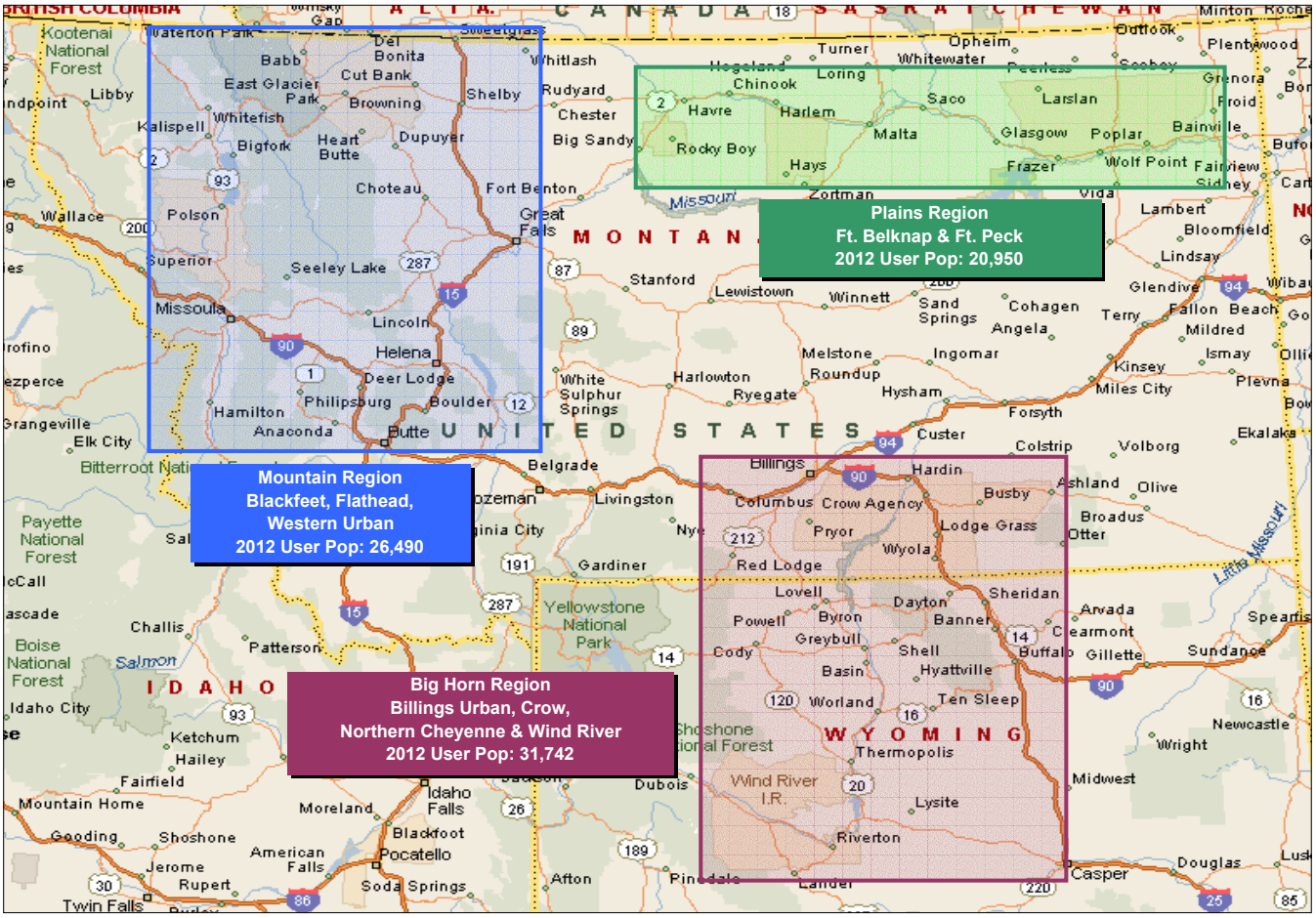
3 Region Scenario



REGION

PRIMARY CARE SERVICE AREA	2012 USER POP	ALTERNATIVE CARE
BIG HORN		
CROW	6,001	Big Horn County Memorial Hospital
LAME DEER	7,477	Deaconness Billings Clinic
ARAPAHOE	4,548	Holy Rosary Healthcare
FT. WASHAKIE	6,433	Hot Springs County Memorial Hospital
LODGE GRASS	3,217	Lander Valley Medical Center
PRYOR	1,141	Memorial Hospital of Sheridan
BILLINGS - URBAN	2,925	Riverton Memorial Hospital
TOTAL SVC POP	31,742	St. Vincent Healthcare
		Veterans Affairs Medical Center Sheridan
		Washakie Medical Center

REGION

PRIMARY CARE SERVICE AREA	2012 USER POP	ALTERNATIVE CARE
PLAINS		
WOLF POINT	4,490	Benefis Healthcare
POPLAR	5,157	Big Sandy Medical Center
FT. BELKNAP	3,537	Frances Mahon Deaconess
PLENTYWOOD	114	Glendive Medical Center
HAYS	1,885	Mercy Medical Center
ROCKY BOY**	5,767	Northeast Montana Health - Poplar
TOTAL SVC POP	20,950	Northeast Montana Health - Wolf Point
		Northern Montana Hospital
		Phillips County Medical Center
		Pondera Medical Center
		Sidney Health Center

MOUNTAIN

SOUTHERN FLATHEAD	6,884	Benefis Healthcare
BROWNING	11,276	Big Sandy Medical Center
NORTHERN FLATHEAD	4,479	Community Medical Center
HEART BUTTE	1,074	Kalispell Regional Medical Center
MISSOULA - URBAN	1,300	Northern Rockies Medical Center
GREAT FALLS - URBAN	1,111	Pondera Medical Center
BUTTE - URBAN	114	Shodair Children's Hospital
HELENA - URBAN	252	St. James Healthcare
		St. Joseph Hospital
TOTAL SVC POP	26,490	St. Luke Community Hospital
		St. Patrick Hospital
		St. Peter's Hospital
		Teton Medical Center
		Veterans Affairs Montana

*** Assumes Rocky Boy participation in analysis*

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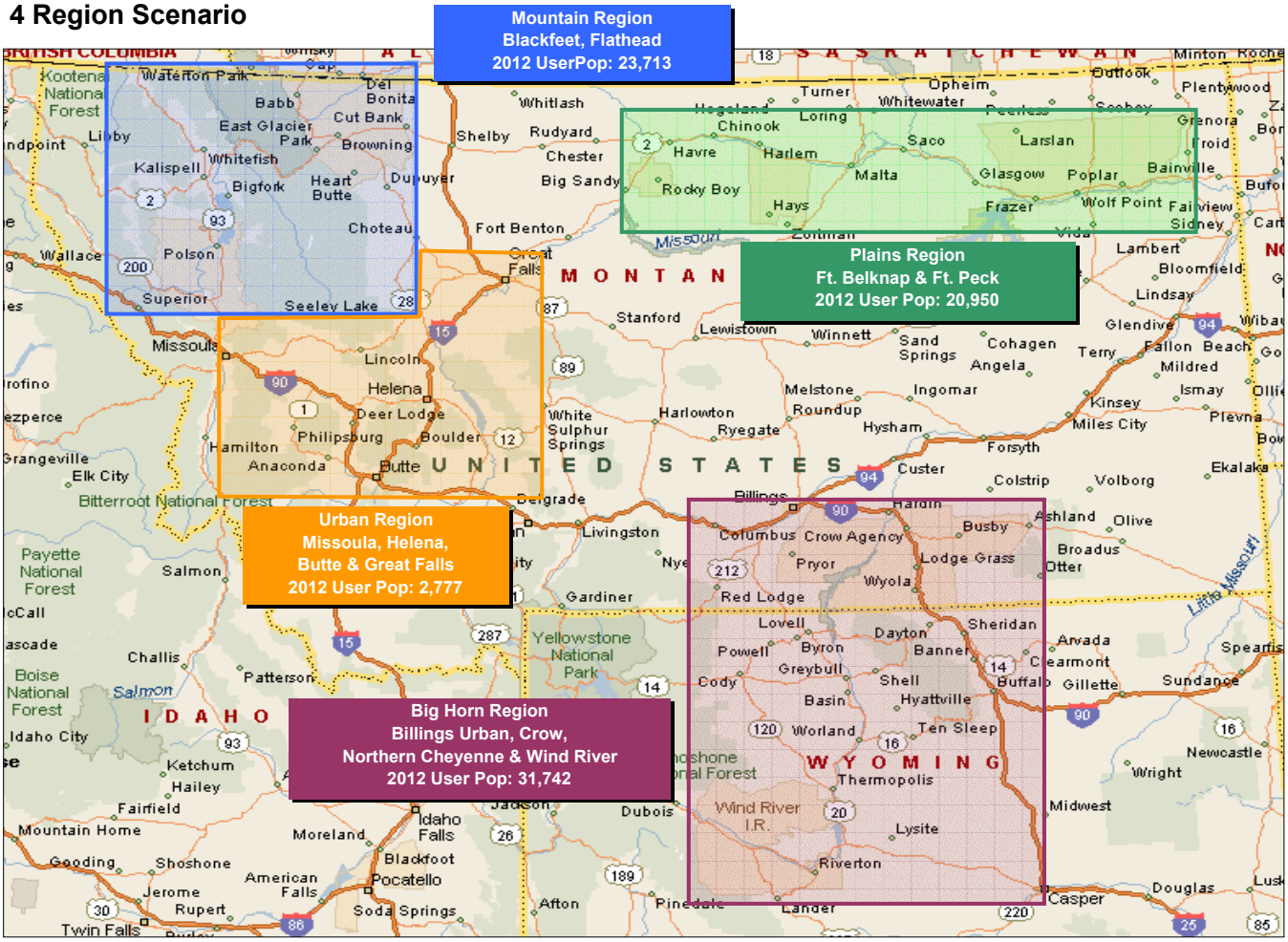
4 Region Scenario



REGION

PRIMARY CARE SERVICE AREA	2012 USER POP	ALTERNATIVE CARE
BIG HORN		
CROW	6,001	Big Horn County Memorial Hospital
LAME DEER	7,477	Deaconness Billings Clinic
ARAPAHOE	4,548	Holy Rosary Healthcare
FT. WASHAKIE	6,433	Hot Springs County Memorial Hospital
LODGE GRASS	3,217	Lander Valley Medical Center
PRYOR	1,141	Memorial Hospital of Sheridan
BILLINGS - URBAN	2,925	Riverton Memorial Hospital
TOTAL SVC POP	31,742	St. Vincent Healthcare
		Veterans Affairs Medical Center Sheridan
		Washakie Medical Center

MOUNTAIN		
SOUTHERN FLATHEAD	6,884	Community Medical Center
BROWNING	11,276	Kalispell Regional Medical Center
NORTHERN FLATHEAD	4,479	Northern Rockies Medical Center
HEART BUTTE	1,074	Pondera Medical Center
		St. Joseph Hospital
		St. Luke Community Hospital
		St. Patrick Hospital
		Teton Medical Center
TOTAL SVC POP	23,713	

REGION

PRIMARY CARE SERVICE AREA	2012 USER POP	ALTERNATIVE CARE
PLAINS		
WOLF POINT	4,490	Benefis Healthcare
POPLAR	5,157	Big Sandy Medical Center
FT. BELKNAP	3,537	Frances Mahon Deaconess
PLENTYWOOD	114	Glendive Medical Center
HAYS	1,885	Mercy Medical Center
ROCKY BOY**	5,767	Northeast Montana Health - Poplar
TOTAL SVC POP	20,950	Northeast Montana Health - Wolf Point
		Northern Montana Hospital
		Phillips County Medical Center
		Pondera Medical Center
		Sidney Health Center

URBAN		
MISSOULA - URBAN	1,300	Benefis Healthcare
GREAT FALLS - URBAN	1,111	Big Sandy Medical Center
BUTTE - URBAN	114	Community Medical Center
HELENA - URBAN	252	Northern Rockies Medical Center
		Pondera Medical Center
		Shodair Children's Hospital
		St. James Healthcare
		St. Joseph Hospital
		St. Luke Community Hospital
		St. Patrick Hospital
		St. Peter's Hospital
		Teton Medical Center
TOTAL SVC POP	2,777	Veterans Affairs Montana

*** Assumes Rocky Boy participation in analysis*

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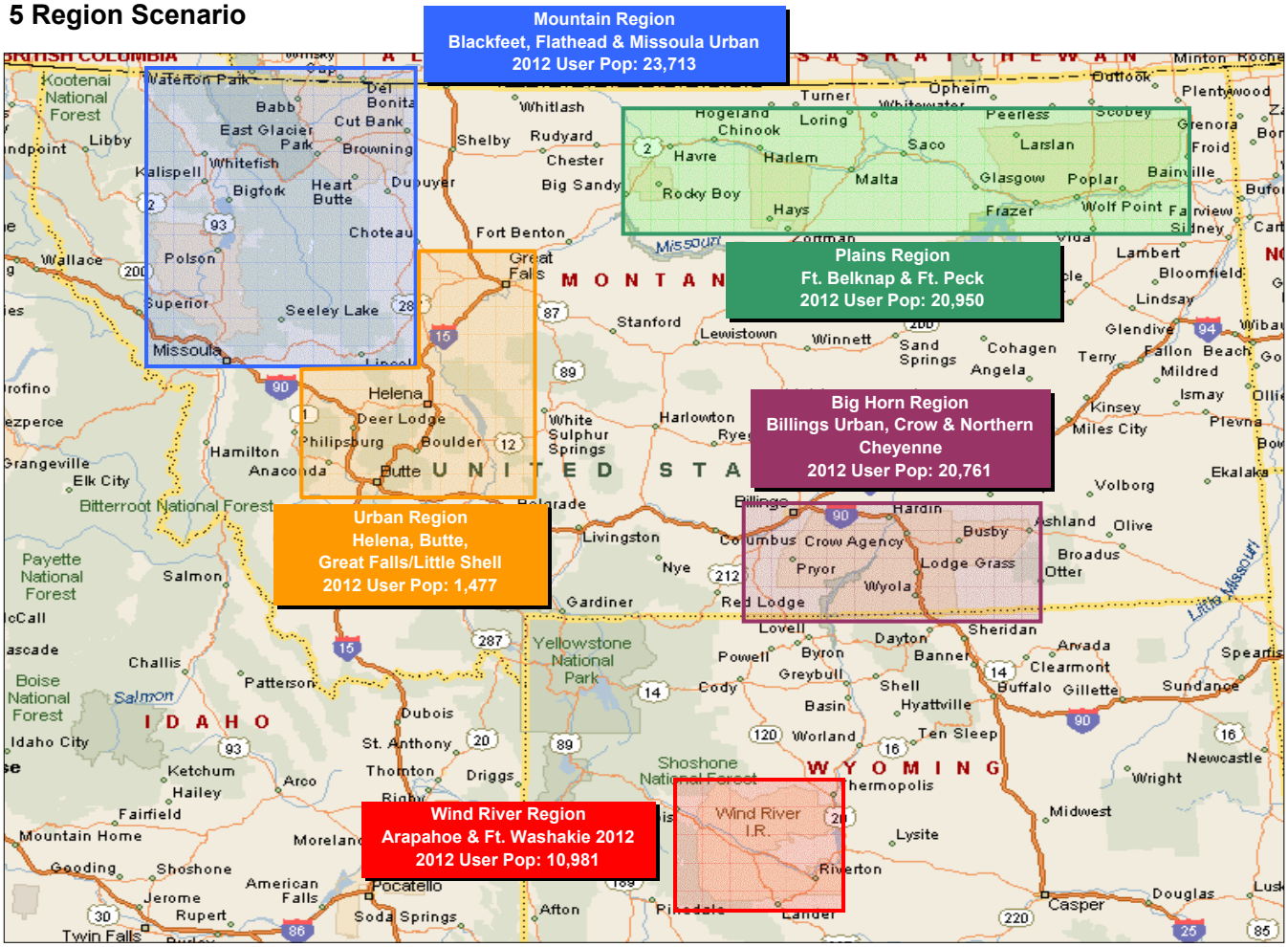
5 Region Scenario



REGION

PRIMARY CARE SERVICE AREA	2012 USER POP	ALTERNATIVE CARE
BIG HORN		
CROW	6,001	Big Horn County Memorial Hospital
LAME DEER	7,477	Deaconness Billings Clinic
LODGE GRASS	3,217	Holy Rosary Healthcare
PRYOR	1,141	Memorial Hospital of Sheridan
BILLINGS - URBAN	2,925	St. Vincent Healthcare
TOTAL SVC POP	20,761	Veterans Affairs Medical Center Sheridan
WIND RIVER		
ARAPAHOE	4,548	Hot Springs County Memorial Hospital
FT. WASHAKIE	6,433	Lander Valley Medical Center
TOTAL SVC POP	10,981	Riverton Memorial Hospital
		Washakie Medical Center
URBAN		
GREAT FALLS - URBAN	1,111	Benefis Healthcare
BUTTE - URBAN	114	Big Sandy Medical Center
HELENA - URBAN	252	Northern Rockies Medical Center
		Pondera Medical Center
		Shodair Children's Hospital
		St. James Healthcare
		St. Peter's Hospital
TOTAL SVC POP	1,477	Teton Medical Center
		Veterans Affairs Montana

REGION

PRIMARY CARE SERVICE AREA	2012 USER POP	ALTERNATIVE CARE
PLAINS		
WOLF POINT	4,490	Benefis Healthcare
POPLAR	5,157	Big Sandy Medical Center
FT. BELKNAP	3,537	Frances Mahon Deaconess
PLENTYWOOD	114	Glendive Medical Center
HAYS	1,885	Mercy Medical Center
ROCKY BOY**	5,767	Northeast Montana Health - Poplar
TOTAL SVC POP	20,950	Northeast Montana Health - Wolf Point
		Northern Montana Hospital
		Phillips County Medical Center
		Pondera Medical Center
		Sidney Health Center
MOUNTAIN		
SOUTHERN FLATHEAD	6,884	Community Medical Center
BROWNING	11,276	Kalispell Regional Medical Center
NORTHERN FLATHEAD	4,479	Northern Rockies Medical Center
HEART BUTTE	1,074	Pondera Medical Center
MISSOULA - URBAN	1,300	St. Joseph Hospital
		St. Luke Community Hospital
		St. Patrick Hospital
		Teton Medical Center
TOTAL SVC POP	23,713	

*** Assumes Rocky Boy participation in analysis*

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Migration Summary & Recommendations

The Analysis that follows is designed to allow a better understanding of Area-wide Migration, in order to understand natural directions of travel and care access outside home Service Areas. This analysis also has to determine a specific planned migration for each Primary Service Area's future. The question that needs to be answered is, what is the tendency for the User Population to seek care outside their Service Area of residence? Some Service Area's will have positive migration, and some will have negative migration. Over the entire area there should be a balance of zero migration. Exceptions to this rule are the medical center locations of IHS, such as Gallup, Phoenix and Anchorage, which in fact may draw Native American patients from outside their Area for Specialty Care. Our experience indicates that Service Areas that act as regional market centers places (places with larger quantities of shopping and business), that have appointment availability, that have newer or nicer facilities, and that perhaps have specialty care clinics tend to have positive or in-migrations. Negative or out-migration Service Areas are likely to have limited staff coverage, limited appointment availability, an older undersized facility and be located in a region that draws limited visitors/shoppers from outside the local SDA. Traditionally and realistically larger facilities benefit from migration and smaller facilities should anticipate some out-migration. In order to move forward with this study, we must make some assumptions for planning on how we believe we should plan for migration.

Negative Migration or Out-Migration – Service Areas that anticipate more visits from their user population to seek care elsewhere, than they expect Other-Service Area User Population's visits to seek care at their facility.

Positive Migration or In-Migration - Service Areas that anticipate less visits from their user population to seek care elsewhere, than they expect Other-Service Area User Population's visits to seek care at their facility.

The charts on the following page show a 3-year average historical migration for outpatient services. Specifics summarized in these reports are located within your Service Area section.

- There is very little migration into the Billings Area from other IHS Areas. No PSA showed greater then 1% of its visits being from outside the Billings Area

Primary Care – There are seven Service Areas indicating positive migration within the Billings Area. The majority of this migration is from within their own Service Units. Crow is experiencing some in-migration from Lame Deer and Ft Belknap is experiencing some from Rocky Boy. Improving Direct Care Assets within the Flathead Service Unit from Missoula to Kalispell will substantially change the migration in this region, thus zero migration must be the planning recommendation. Improvements to the staffing and/or facility at Lodge Grass will likely reduce the flow to Crow for Primary Care. Improving Primary Care in Billings will reduce the migration to Pryor and Crow from the city. Crow should continue to plan for the positive migration of 14% from Lame Deer. Hays, while having a new facility, still shows a substantial out migration to Fort Belknap, this will likely continue into the future. Arapahoe, Browning, and Poplar should be planned for their positive historical migration into the future. Hays resources will be planned with a negative 20% to Fort Belknap.

ER/Urgent Care – The three hospitals, Crow, Browning and Fort Belknap all show moderate positive migration to their Emergency departments. Lame Deer is showing a negative migration from its Emergency room with some workload being lost to the Crow hospital. This out-migration has declined in each of the years analyzed, but a portion of the Northern Cheyenne Service Unit will continue to be closer to the Hospital at Crow. A negative migration of 5% is recommended for future planning for the Lame Deer Service Area.

Specialty Care – The three hospitals show moderate positive migration for specialty care, primarily coming from their Service Units. Poplar is the location for Specialty care in the Fort Peck Service Unit. The planned migration for specialty care has more to do with the availability of specialist, local staffing capability and capacity. This complex relationship does not allow a simple percentage migration to be applied to these workloads. As we move to the next phase and consider workload referrals to regional centers, the

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migration patterns for Specialty Care will be established. All areas will be planned for zero migration for Specialty Care.

Inpatient Care > 14 years of age, Inpatient Care < 14 years of age – This has not been completed at this time. A new complete data set has been requested.

Outpatient Summary

		Primary Care		ER/Urgent Care		Specialty Care		
Facility	2001 User Pop	Historical Migration %	Proposed Migration % for Planning	Historical Migration %	Proposed Migration % for Planning	Historical Migration %	Proposed Migration % for Planning	Remarks
Arapahoe	4,043	11.5%	11.5%	-100.0%	0.0%	-0.8%	0.0%	PC - Ft. Washakie and Non PSA - Areas
Browning	10,267	3.5%	3.5%	9.2%	9.2%	10.2%	0.0%	PC from Great Falls & Northern Flathead, ER and Specialty Migration from Heart Butte & Great Falls
Crow	5,260	51.0%	14.0%	60.0%	60.0%	78.7%	0.0%	PC - Lame Deer (14%), Lodge Grass (19%), Billings (11%), & Non- Service Areas
Ft. Belknap	3,110	22.2%	22.2%	41.0%	41.0%	49.1%	0.0%	PC - Hays (16%) and Rocky Boy (4%)
Ft. Washakie	5,738	-4.1%	0.0%	-100.0%	0.0%	1.3%	0.0%	
Hays	1,627	-24.3%	-20.0%	-93.7%	0.0%	-99.8%	0.0%	
Heart Butte	912	-1.1%	0.0%	-99.7%	0.0%	-67.1%	0.0%	
Lame Deer	6,400	-13.8%	0.0%	-5.6%	-5.0%	-21.8%	0.0%	
Lodge Grass	2,804	-41.0%	0.0%	-99.2%	0.0%	-82.5%	0.0%	
Northern Flathead	3,874	-17.9%	0.0%	-100.0%	0.0%	-76.5%	0.0%	
Poplar	4,440	8.8%	8.0%	-100.0%	0.0%	32.0%	0.0%	PC - WolfPoint (8%) & Plentywood (1%)
Pryor	1,000	29.0%	0.0%	-97.9%	0.0%	-42.9%	0.0%	PC - Billings (27%), Crow (2%) and Lodge Grass (5%)
Rocky Boy	4,337	-3.6%	0.0%	-11.6%	0.0%	-5.9%	0.0%	
Southern Flathead	5,837	29.4%	0.0%	-100.0%	0.0%	46.0%	0.0%	PC - Northern Flathead (20%) & Missoula (10%)
Wolf Point	3,999	-7.2%	0.0%	-41.1%	0.0%	-34.8%	0.0%	
Billings*	2,353	-100.0%	0.0%	-100.0%	0.0%	-100.0%	0.0%	
Butte*	117	-100.0%	0.0%	-100.0%	0.0%	-100.0%	0.0%	
Great Falls*	1,108	-99.7%	0.0%	-100.0%	0.0%	-100.0%	0.0%	
Helena*	215	-100.0%	0.0%	-100.0%	0.0%	-100.0%	0.0%	
Missoula*	1,153	-100.0%	0.0%	-100.0%	0.0%	-100.0%	0.0%	
Non-Service Unit*	704	-100.0%	0.0%	-100.0%	0.0%	-100.0%	0.0%	
Plentywood*	88	-100.0%	0.0%	0.0%	0.0%	-100.0%	0.0%	

**No RPMS collecting facility today*

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